# New River Valley (PDC 4)
# Coordinated Human Service Mobility Plan

*Counties: Floyd, Giles, Montgomery, and Pulaski*

*City: Radford*

## June 2008

*prepared for*
**Virginia Department of Rail and Public Transportation**

*prepared by*
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*and*
**KFH Group**

CAMBRIDGE SYSTEMATICS

KFH GROUP

DRPT

**New River Valley (PDC 4)**
**Coordinated Human Service Mobility Plan**
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## I. Executive Summary

This Coordinated Human Service Mobility (CHSM) Plan is prepared in response to the coordinated planning requirements of SAFETEA-LU (Safe, Accountable, Flexible, Efficient Transportation Equity Act – A Legacy for Users, P.L. 190-059), set forth in three sections of the Act: Section 5316-Job Access and Reverse Commute, Section 5317- New Freedom Program and Section 5310-Elderly Individuals and Individuals with Disabilities Program. The coordinated plan establishes the construct for a unified comprehensive strategy for transportation service delivery in the New River Valley Planning District (PDC 4) that is focused on unmet transportation needs of seniors, people with disabilities, and individuals of low income.

This CHSM Plan details the coordinated transportation planning process for PDC 4, and includes the following four required elements:

1. An assessment of available services identifying current providers (public and private).

   Information on available transportation services and resources in PDC 4 is included in Section VI.

2. An assessment of transportation needs for individuals with disabilities, older adults, and people with low incomes – this assessment can be based on the experiences and perceptions of the planning partners or on data collection efforts and gaps in service.

   For PDC 4, analysis of demographic and potential destinations is included in Section V, and assessment of unmet transportation needs and gaps is contained in Section VII.

3. Strategies and/or activities and/or projects to address the identified gaps between current services and needs, as well as opportunities to improve efficiencies in service delivery.

   The 11 strategies identified during the planning process are located in Section VIII.

4. Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.

The prioritized strategies and projects for implementation for PDC 4 are included in Section IX.

## Approach to the CHSM Plan

Ultimately, the CHSM Plan must:

- Serve as a comprehensive, unified plan that promotes community mobility for seniors, persons with disabilities and persons of low income;

- Establish priorities to incrementally improve mobility for the target populations; and

- Develop a process to identify partners interested, willing and able to promote community mobility for the target populations.

To achieve these goals, the planning process involved:

- Quantitative analyses to identify resources, needs and potential partners;

- Qualitative activities included public meetings with major agencies and organizations funding human services, with representative direct service providers, and with consumers representing the target group constituencies; and

- An inventory of available public transit services was undertaken to provide initial informational tools to the target populations and their representatives.

In addition, this plan includes information on an ongoing structure for leading CHSM Plan updates and facilitating coordination activities in the region.

## II. Introduction

The Federal legislation that provides funding for transit projects and services includes new coordinated planning requirements for the Federal Transit Administration's (FTA) Section 5310 (Elderly Individuals and Individuals with Disabilities), Section 5316 (Job Access and Reverse Commute – JARC) and Section 5317 (New Freedom) Programs. To meet these new requirements, the Virginia Department of Rail and Public Transportation (DRPT) undertook the development of CHSM Plans for rural and small urban areas of the Commonwealth. While these plans focus on the elements of the FTA coordinated planning requirements, as suggested by the title, these plans take a broad view of the mobility issues faced daily by older adults, people with disabilities, and people with lower incomes in Virginia.

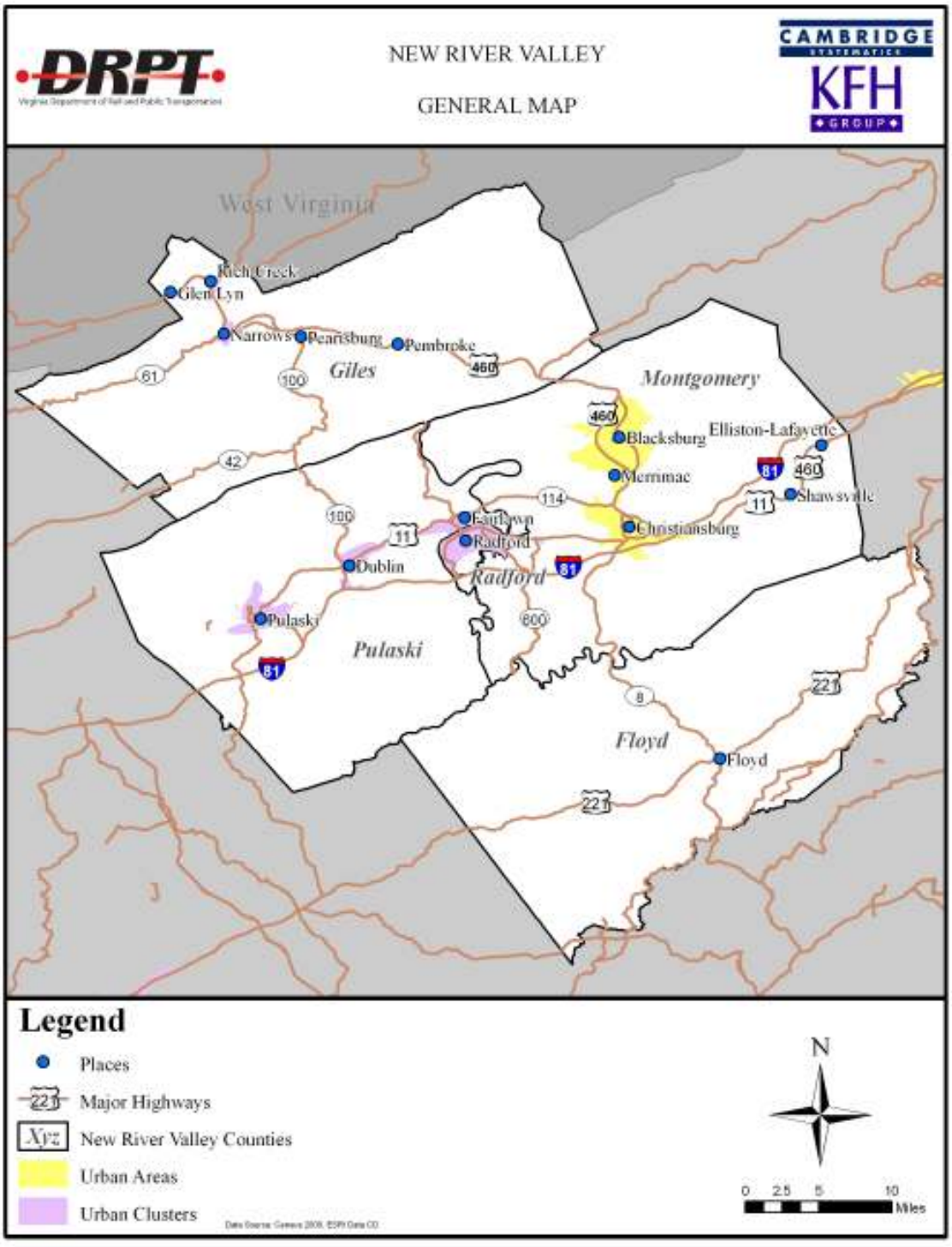
The CHSM Plans are organized geographically around 21 Planning District Commissions (PDCs) throughout the Commonwealth. The PDCs have been chartered by the local governments of each planning district under the Regional Cooperation Act to conduct planning activities on a regional scale.

This CHSM Plan is for the New River Valley Planning District (PDC 4). As shown in Figure 1, PDC 4 is located in the southwest region of the Commonwealth, and includes Floyd, Giles, Montgomery, and Pulaski Counties and the City of Radford. Aside from a few major cities in the central part of the region, PDC 4 is largely rural in nature with scattered populations and dispersed destinations, presenting distinct transportation needs for older adults, people with disabilities, and people with lower incomes.

The plan development featured continuous input from local stakeholders. A series of workshops was conducted to gather input on unmet transportation needs and issues, and to reach consensus on specific strategies to address the mobility needs of older adults, people with disabilities, and people with lower incomes in the region. More information on outreach activities is included in Section IV.

In addition, previous to the workshops the Center for Transportation Policy completed a Public Mobility Project report in cooperation with PDC 4. This report is referenced appropriately in this CHSM Plan. The report's Executive Summary is included in Appendix A, and a full report is available at http://www.nrvpdc.org/publicmobility/Project.html.

**Figure 1. Geography of New River Valley (PCD 4)**



## III. Background

In August 2005, the President signed into law SAFETEA-LU, legislation that provides funding for highway and transit programs. SAFETEA-LU includes new planning requirements for the FTA Section 5310 (Elderly Individuals and Individuals with Disabilities), Section 5316 (JARC), and Section 5317 (New Freedom) Programs, requiring that projects funded through these programs "must be derived from a locally developed, coordinated public transit- human services transportation plan."

In March 2006, FTA issued proposed circulars with interim guidance for Federal FY 2007 funding through the Section 5310, JARC, and New Freedom Programs, including the coordinated planning requirements. Circulars with final guidance were issued on March 29, 2007, with an effective date of May 1, 2007. The final guidance noted that all grant funds obligated in Federal FY 2008 and beyond must be in full compliance with the requirements of these circulars and the coordinated plan requirement[1]. As the designated lead agency and recipient of Federal transit funds in Virginia—including the Section 5310, JARC, and New Freedom Funds—DRPT led the development of CHSM Plans for rural and small urban areas to meet these new Federal requirements.

### 3.1 Coordinated Plan Elements

FTA guidance defines a coordinated public transit-human service transportation plan as one that identifies the transportation needs of individuals with disabilities, older adults, and people with low incomes; provides strategies for meeting those local needs; and prioritizes transportation services for funding and implementation. In total, there are four required plan elements:

- An assessment of available services that identifies current providers (public, private, and non-profit); and
- An assessment of transportation needs for individuals with disabilities, older adults, and people with low incomes.

[1] The final guidance from FTA on the coordinated planning requirements for the Section 5310, JARC, and New Freedom Programs can be found in Appendix B.

- Strategies, activities, and/or projects to address the identified gaps and achieve efficiencies in service delivery; and
- Relative priorities for implementation based on resources, time, and feasibility for implementing specific strategies/activities identified.

## 3.2 Funding Program Descriptions

*Section 5310 (Elderly Individuals and Individuals with Disabilities)*

The Federal grant funds awarded under the Section 5310 program provide financial assistance for purchasing capital equipment to be used to transport the elderly and persons with disabilities. Private non-profit corporations are eligible to receive these grant funds. The Section 5310 grant provides 80% of the cost of the equipment purchased, with the remaining 20% provided by the applicant organization. The 20% must be provided in cash by the applicant organization, and some non-transportation Federal sources may be used as matching funds.

Federal Section 5310 funds are apportioned annually by a formula that is based on the number of elderly persons and persons with disabilities in each State. DRPT is the designated recipient for Section 5310 funds in Virginia.

*Section 5316 (JARC)*

The JARC Program provides funding for developing new or expanded transportation services that connect welfare recipients and other low income persons to jobs and other employment related services. DRPT is the designated recipient for JARC funds in areas of the Commonwealth with populations under 200,000 persons. Projects are eligible to receive funding for both capital (80/20 match) and operating (50/50 match) costs.

From its inception in Federal FY 1999, the JARC program funds were allocated to States through a discretionary process. The SAFETEA-LU legislation changed the allocation mechanism to a formula based on the number of low-income individuals in each State. The legislation also specifies that, through this formula mechanism, 20% of JARC funds allocated to Virginia must go to areas with populations under 200,000.

Mobility management projects are eligible for funding through the JARC Program, and are considered an eligible capital cost. Therefore, the Federal share of eligible project costs is 80% (as opposed to 50% for operating projects). Additional information on possible mobility management projects is included in Appendix C.

Section 5317 (New Freedom Program)

The New Freedom Program provides funding for capital and operating expenses designed to assist individuals with disabilities with accessing transportation services, including transportation to and from jobs and employment support services. Projects funded through the New Freedom Program must be both new and go beyond the requirements of the Americans with Disabilities Act (ADA) of 1990.

New service has been identified by FTA as any service or activity not operational prior to August 10, 2005 and one without an identified funding source as of August 10, 2005, as evidenced by inclusion in the Transportation Improvement Plan (TIP) or the State Transportation Improvement Plan (STIP).

Similar to the JARC Program, DRPT is the designated recipient for New Freedom funds in areas of the State with populations under 200,000 persons. Similar to JARC, a total of 20% of New Freedom funds are allocated to these areas. Projects are eligible to receive funding for both capital (80/20 match) and operating (50/50 match) costs. Similar to JARC, a total of 20% of New Freedom funds are allocated to these areas. Projects are eligible for funding for both capital (80/20 match) and operating (50/50 match) costs. Also, like JARC, mobility management projects are eligible for funding and are considered an eligible capital expense.

An overview of these FTA programs is included in Table 1.

**Table 1. Program Information**

| FTA Program | Match Ratios |
|---|---|
| S. 5310 – Elderly and Disabled | Capital Only:<br>80% Federal<br>20% Local |
| S. 5316 – JARC | Capital:<br>80% Federal<br>20% Local<br><br>Operating:<br>50% Federal<br>50% Local |
| S. 5317 – New Freedom | Capital:<br>80% Federal<br>20% Local<br><br>Operating:<br>50% Federal<br>50% Local |

Matching Funds for Section 5310, JARC, and New Freedom Programs

FTA guidance notes that matching share requirements are flexible to encourage coordination with other Federal programs. The required local match may be derived from other non-Department of Transportation Federal programs. Examples of these programs that are potential sources of local match include employment training, aging, community services, vocational rehabilitation services, and Temporary Assistance for Needy Families (TANF).

More information on these programs in available in Appendix D, and on the United We Ride Website at http://www.unitedweride.gov. United We Ride is the Federal initiative to improve the coordination of human services transportation.

## 3.3 Coordination of Public Transit and Human Service Transportation in PDC 4

As part of its outreach efforts in the coordinated transportation planning process, DRPT hosted a series of regional workshops. Details regarding the outreach efforts in PDC 4 are outlined in the next section. The initial workshop included a discussion of current and potential efforts to improve coordination of public transit and human services transportation.

Participants also discussed ways to improve mobility options for older adults, people with disabilities, and people with low incomes. This general discussion included the various functions to improve coordination of services, including:

- Goals of Coordination:
    - More cost-effective service delivery
    - Increased capacity to serve unmet needs
    - Improved quality of service
    - Services which are more easily understood and accessed by riders
- Benefits of Coordination:
    - Gain economies of scale
    - Reduce duplication and increase efficiency
    - Expand service hours and area
    - Improve the quality of service
- Key Factors for Successful Coordination:
    - Leadership – Advocacy and support; instituting mechanisms for coordination
    - Participation – Bringing the right State, regional, and local stakeholders to the table
    - Continuity – Structure to assure an ongoing forum, leadership to keep the effort focused, and respond to ever-changing needs

A more specific discussion that occurred at the local workshop identified Blacksburg Transit and Pulaski Area Transit as two key agencies for providing coordinated service in PDC 4. More information on Blacksburg Transit and Pulaski Area Transit services is included in the "Table 3 Inventory of Available Services" in Section VI of this plan. In addition, the Center for Transportation Policy report referenced in the Introduction section focused on ways to coordinate human services transportation in the region and included a resource manual assist with these efforts.

## IV. Outreach Efforts

FTA guidance notes that States and communities may approach the development of a coordinated plan in different ways. Potential approaches suggested by FTA include community planning sessions, focus groups, and surveys. DRPT took a broad approach that would help ensure the participation of key stakeholders at the local level throughout the development of this plan. It included the development of an extensive mailing list, a series of local workshops, and numerous opportunities for input and comments on unmet transportation needs and potential strategies and projects to improve mobility in the region.

### 4.1 Invitations to Participate in Plan Development

The development of the invitation list for all potential regional workshop attendees capitalized on the established State Interagency Transportation Council that includes the Departments of/for Rail and Public Transportation; Rehabilitative Services; the Aging; the Blind and Vision Impaired; Medical Assistance Services; Mental Health, Mental Retardation and Substance Abuse Services; Social Services; and Health; as well as the Office of Community Integration (Olmstead Initiative) and the Virginia Board for People with Disabilities. Representatives of each agency were asked to attend at least one of the regional CHSM planning workshops, and to inform and invite other interested staff from their agency or agencies with whom they contract or work. In addition, special contacts by DRPT were made with each PDC Executive Director regarding the need for PDC participation, leadership, and involvement in the regional CHSM workshops. A presentation was also made during a conference of PDC staff to obtain input on the CHSM workshops and encourage involvement by the PDCs.

Key stakeholders throughout the Commonwealth also received digital invitations from Matthew Tucker, Director of DRPT. The invitation was forwarded to the Executive Director of all primary agencies responsible for providing or arranging human service transportation, and any entity that has previously participated in the Section 5310 Program.

Overall, eight broad categories of agencies received invitations (total number of agencies per category in the Commonwealth included in parentheses):

- Community Services Boards (CSBs) and Behavioral Health Authorities (BHAs). These boards provide or arrange for mental health, mental retardation and substance abuse services within each locality. (40 total)

- Employment Support Organizations (ESOs). These organizations provide employment services for persons with disabilities within localities around the State. (48 total)

- Area Agencies on Aging (AAAs). These organizations offer a variety of community-based and in-home services to older adults, including senior centers, congregate meals, adult day care services, home health services, and Meals-on-Wheels. (22 total)

- Public Transit Providers. These include publicly or privately-owned operators that provide transportation services to the general public on a regular and continuing basis. They have clearly published routes and schedules, and have vehicles marked in a manner that denotes availability for public transportation service. (50 total)

- Disability Services Boards. These boards provide information and resources referrals to local governments regarding the Americans with Disabilities Act (ADA), and develop and make available an assessment of local needs and priorities of people with physical and sensory disabilities. (41 total)

- Centers for Independent Living (CILs). These organizations serve as educational/resource centers for persons with disabilities. (16 total)

- Brain Injury Programs that serve as clubhouses and day programs for persons with brain injuries. (12 total)

- Other appropriate associations and organizations, including Alzheimer's Chapters, AARP, and the VA Association of Community Services Boards (VACSB).

## 4.2 Regional Workshops

DRPT conducted an initial round of regional workshops throughout Virginia, and representatives of PDC 4 participated in the Blacksburg workshop on May 15, 2007. This workshop included an overview of the new Federal requirements and Virginia's approach, information on the Section 5310, JARC, and New Freedom Programs, and a presentation of the Census-based demographic data for the region.

The workshop also included the opportunity to gain input from participants on unmet transportation needs and gaps. The majority of time in the workshop was dedicated to obtaining input on the local

transportation needs of older adults, people with disabilities, and people with lower incomes, and on available transportation resources.

Participants from PDC 4 were invited to a subsequent workshop, held in Blacksburg on November 14, 2007. This workshop focused on potential strategies and projects to meet the needs identified in this plan, and the priorities for implementation. Participants provided comments on the proposed strategies, and approved the ones included in Section VIII.

A third workshop for PDC 4 was held in Roanoke, VA on May 14, 2008. This workshop included a review of the April 2008 CHSM Plan and final agreement on the components of this June 2008 version. The coordinated planning participants also provided a more formal endorsement of the CHSM Plan that is detailed in Section X. The workshop also featured an announcement from DRPT regarding the next application cycle.

A full listing of workshop participants is included in Appendix E.

## 4.3 Opportunities to Comment on Plan

In addition to the comments obtained during the regional workshops, local stakeholders received preliminary portions of this plan to review, as well as draft versions of the entire plan. Their comments were incorporated into this CHSM Plan.

## V. Demographics and Potential Destinations

To provide an informational framework for the PDC 4 CHSM Plan, data on the three potentially transit dependent populations and on potential destinations were collected and analyzed using Geographic Information Systems (GIS) and other data analysis tools.

### 5.1 Methodology

The process of assessing transportation needs was a multi-part effort that involved reviewing and summarizing the demographic characteristics of the PDC and the potential destinations, which reflect potential travel patterns of residents. To evaluate transportation needs specific to each population group, Census 2000 data for persons over age 60, disabled adults, persons living below the poverty level, and autoless households were mapped. Autoless households are a helpful indicator of areas that are more likely to need transportation options because residents do not have access to a personal vehicle or cannot drive for various reasons.

The underlying data, at the block group level, for the potentially transit dependent populations and autoless households are included in Appendix F. Mapping the geographic distribution of each population helped to visualize the analysis of high, medium, and low levels of transportation need throughout the region. Numbers for these four population segments were then combined into aggregate measures of transportation need, and evaluated by both density and percentage of potentially transit dependent persons. This population profile was used to identify areas of the PDC that have either high densities of persons in need of transportation services or high percentages of the population with such needs. General population density was also mapped to compare the PDC's areas of high density with areas of high numbers of potentially transit dependent persons, portrayed in the maps for each population segment.

The results of the process are summarized in this section, and are intended to help identify major factors in the coordinated transportation planning process: 1) those geographic areas of the PDC that have high relative transportation needs, and whether these areas are served by existing transportation services; and 2) the potential destinations that older adults, people with disabilities, and people with lower incomes need transportation to access.

## 5.2 Demographics

*Population Density*

Population density is an important indicator of how rural or urban an area is, which in turn affects the types of transportation that may be most viable. Fixed-route transit is typically more practical and successful in areas with 1,000-2,000 or more persons per square mile, while specialized transportation services are typically a better fit for rural areas with less population density.

As shown in Figure 2:

- The vast majority of the region has a low-density population, with only a few areas with a population of over 500 people per square mile.

- Pulaski, Dublin, Fairlawn, Radford, Blacksburg, Christiansburg, and Narrows have block groups that have more than 2,000 persons per square mile.

- These cities (except for Narrows), along with Pearisburg, also have population densities in the medium range, between 1000 and 2,000 persons per square mile.

- Merrimac and some areas outside of the major towns have a low population density, between 500 and 1,000 persons per square mile.

*Number of Older Adults, People with Disabilities, and People with Lower Incomes*

The numbers of older adults, people with disabilities, and people with lower incomes were mapped in Figures 3, 4, and 5, respectively. While these Figures are helpful indicators of the physical distribution of these population segments, it is important to remember that these numbers cover large areas; therefore, density or a lack thereof will be important in considering the types of transportation that can best serve these populations.

As shown in Figure 3:

- Aside from two small areas in the City of Radford and near Blacksburg, the rest of PDC 4's Census block groups contain more than 100 older adults.

- Large portions of the PDC, including the east and west ends of Giles County, the majority of Montgomery County, northeastern Pulaski County, western Radford, and patches of Floyd County, have more than 200 older adults per census block group.

- The rest of the PDC is in the medium range, with 100-200 older adults per block group.

As shown in Figure 4:

- The block groups near Merrimac and outside Christiansburg are the only areas with a high number of individuals with disabilities.

- Pembroke, Narrows, Pulaski, Radford, and Floyd are among areas with a medium number, 100-200, of persons with disabilities per block group.

- Approximately half of the PDC lies in the low range with less than 100 persons with disabilities per block group.

As shown in Figure 5:

- Pulaski, Radford, Merrimac, Blacksburg, Christiansburg, and Floyd have high numbers of persons below poverty per block group.

- The majority of Giles and Montgomery Counties, the central strip of Pulaski County, the southern portion of Floyd County, and southern Radford lie in the medium range.

- South central Giles County, the north and south ends of Pulaski County, and patches throughout the rest of the region have a low number of persons below poverty per block group.

*Autoless Households*

Persons who have limited access to or ability to use a car rely on other transportation options, including public transit services operated in the region and on human service organization-provided transportation that is generally restricted to agency clients.

As shown in Figure 6:

- Pulaski, Radford, Merrimac, and Christiansburg have block groups with more than 100 autoless households.

- The areas around Narrows, Pearisburg, southwest Pulaski, Dublin, Blacksburg, Floyd, and between Radford and Merrimac have 50-100 autoless households per census block group.

- The rest of the PDC has less than 50 per block group.

*Ranked Density and Percentage*

As described earlier, the numbers of older adults, disabled persons, persons below poverty, and autoless households were combined into an aggregate measure for transportation need. Because an individual may belong to more than one of the key population segments, the absolute numbers of these populations could not simply be added together to obtain a total number of transportation dependent persons. To minimize counting such individuals multiple times when considering all the population segments together, each population segment was ranked. Then all the rankings were summarized to ascertain the block groups' overall ranking for potentially transit dependent persons. This overall ranking was first done by density, which helps identify areas with high concentrations of persons who are likely to have transportation needs.

As shown in Figure 7:

- The highest concentration of potentially transit dependent persons is in Pulaski, Dublin, Radford, Fairlawn, Christiansburg, Merrimac, Blacksburg, Pearisburg, and Narrows.

- The next highest ranking block groups are located directly outside these towns, as well as south of Pembroke and just east of Floyd.

- The rest of the PDC is in the low range for relative transit need based on ranked density.

The block groups were also ranked overall by percentage. Unlike the density ranking that portrays the concentration of transportation dependent persons, the percentage ranking captures the proportion of people within a block group that likely has transportation needs. The percentage ranking indicates that there are potentially transit dependent persons throughout the region that may not live in dense clusters.

As shown in Figure 8:

- The results of this ranking show a greater distribution of block groups in the high range.
- The northwestern section of Giles County, southwestern Pulaski County, and patches near Radford, Christiansburg, Merrimac, and Floyd all have block groups with high relative transit need based on ranked percentage.
- The majority of Giles and Floyd Counties and portions of central New River Valley have medium relative transit need by ranked percentage.
- Eastern Montgomery County, northwestern Pulaski County, and the PDC's central area south of Radford have relatively low proportions of transit dependent persons.

## Figure 2. Population Density

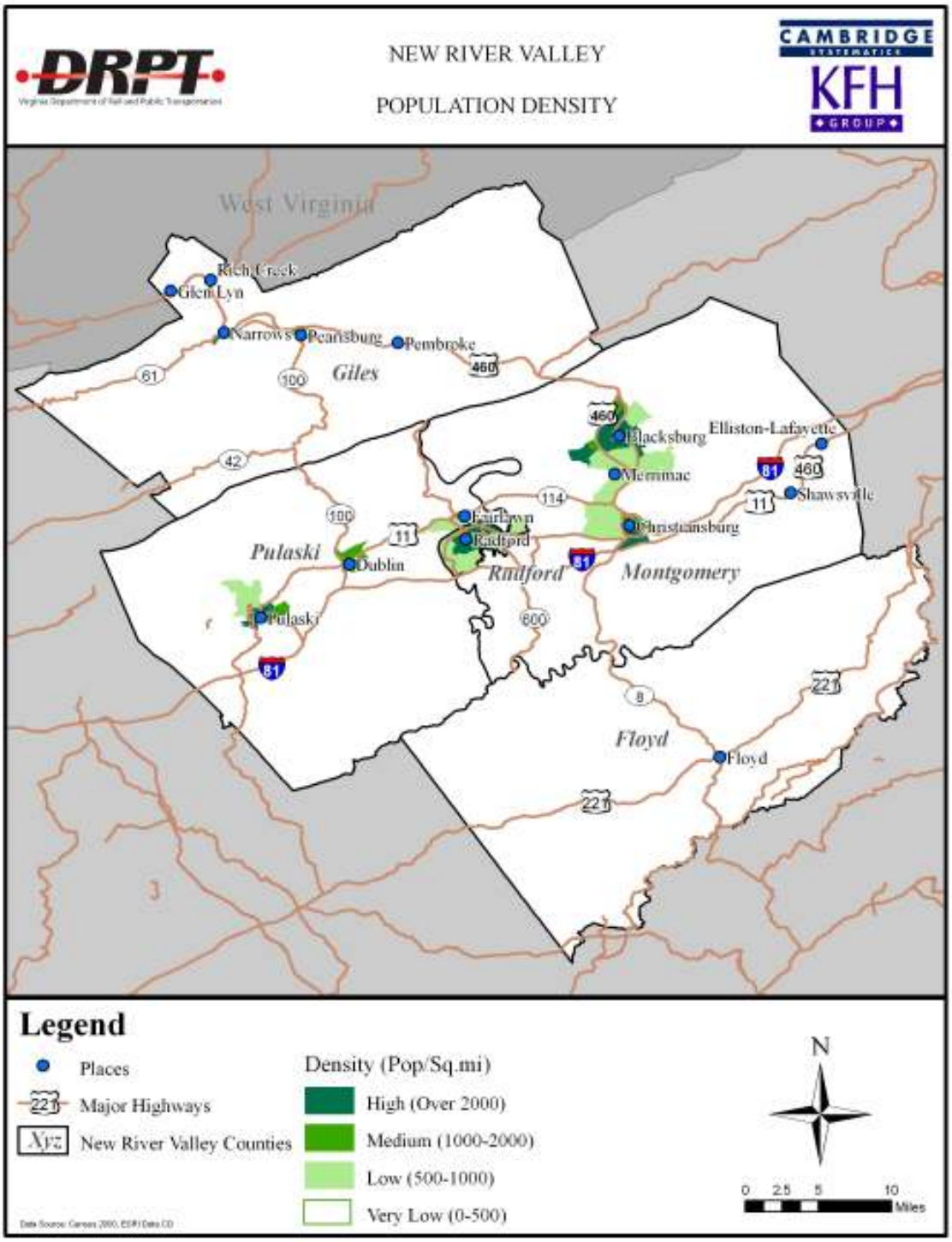


**Figure 3. Persons Age 60 and Older Per Census Block Group**

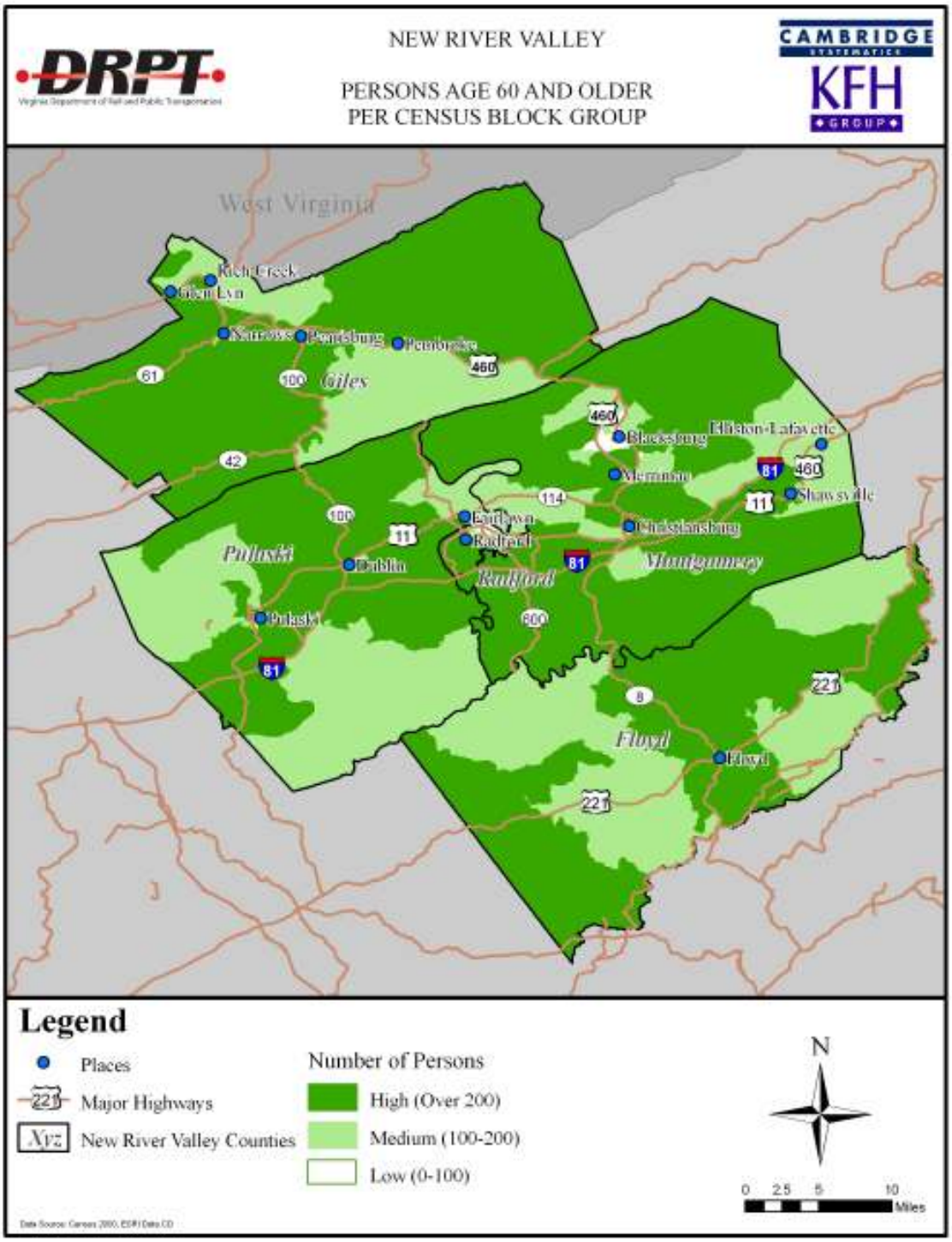


**Figure 4. Persons With Disabilities Per Census Block Group**

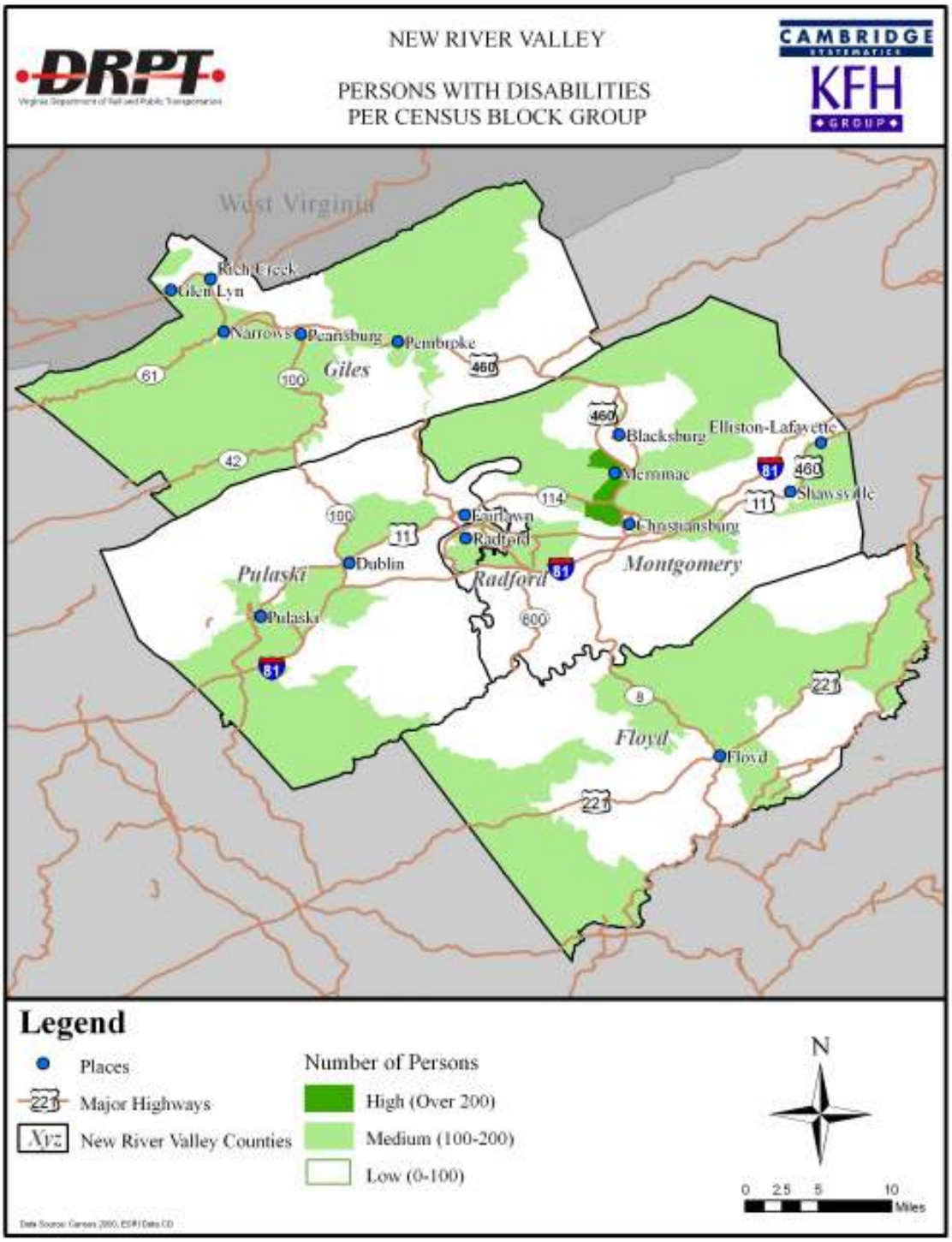


**Figure 5. Persons Below Poverty Per Census Block Group**

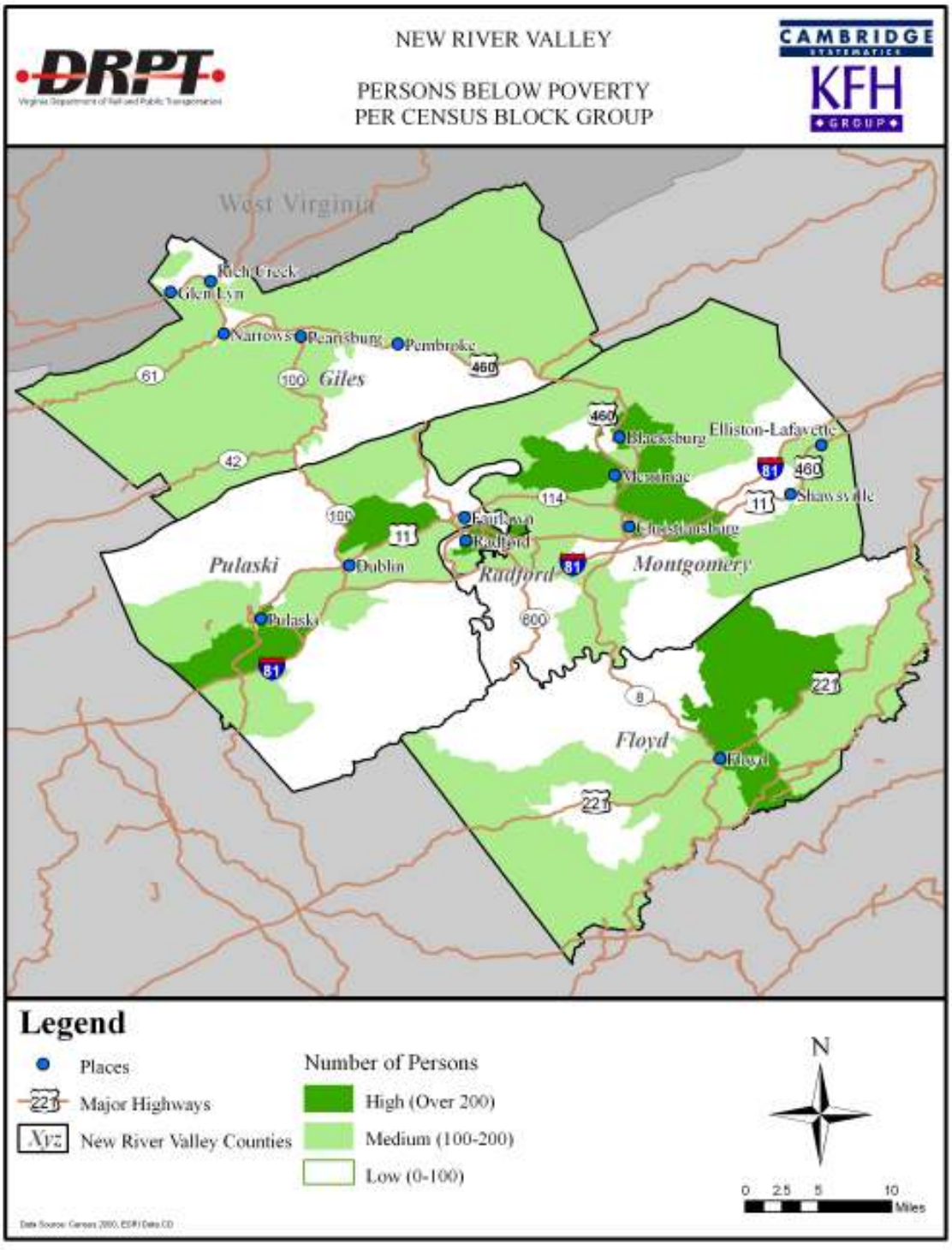


**Figure 6. Autoless Households Per Census Block Group**

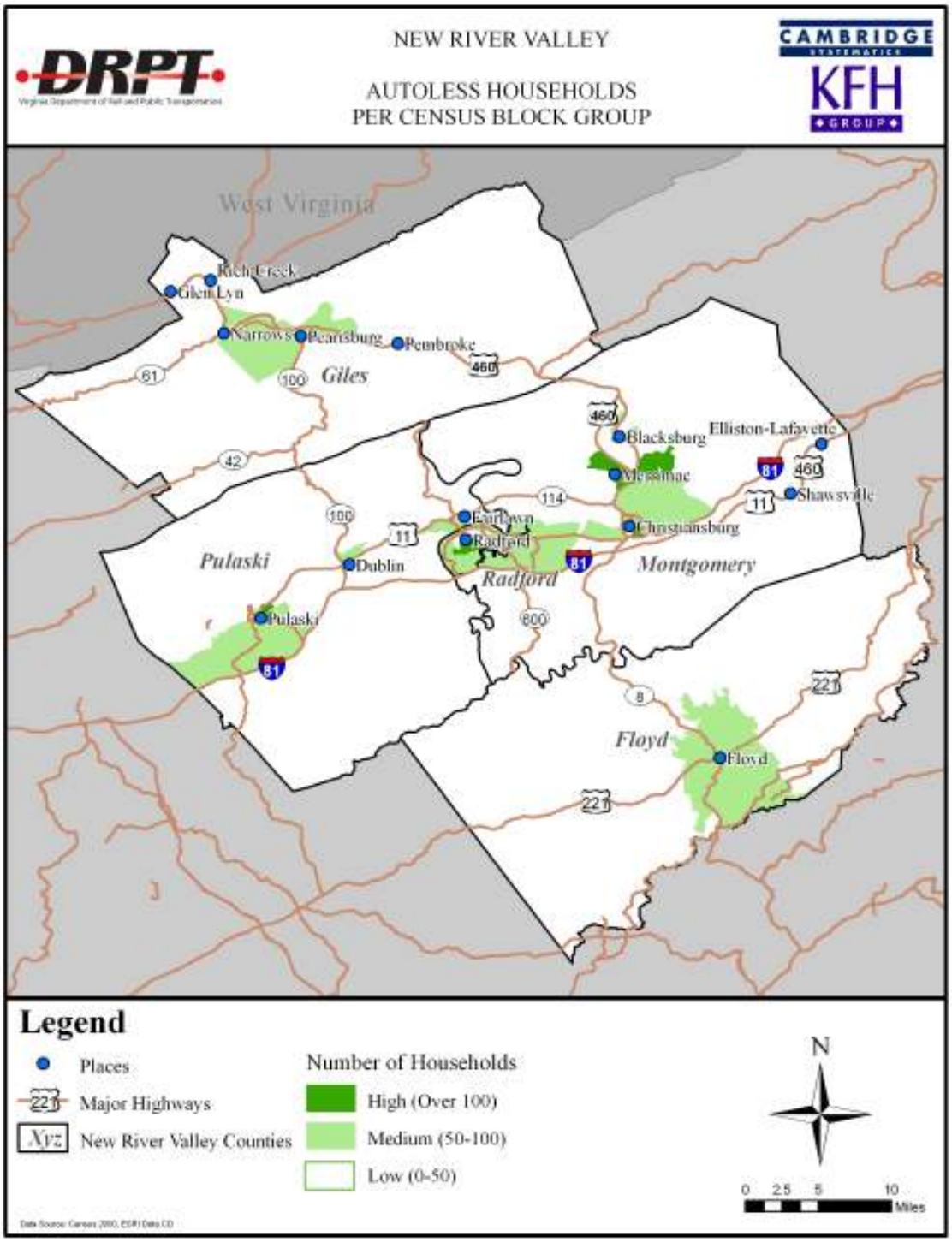


**Figure 7. Transit Need by Ranked Density of Transit Dependent Persons**

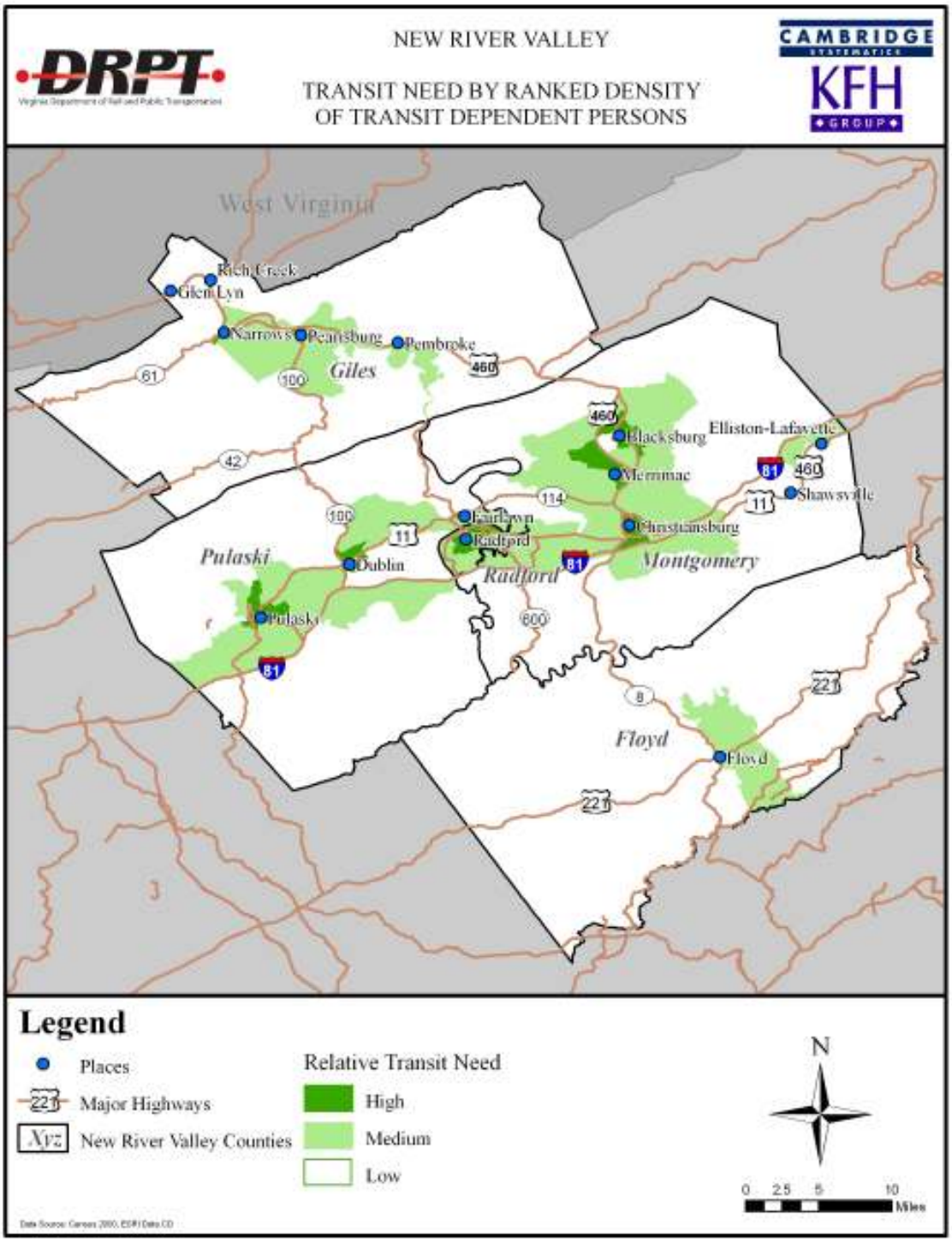
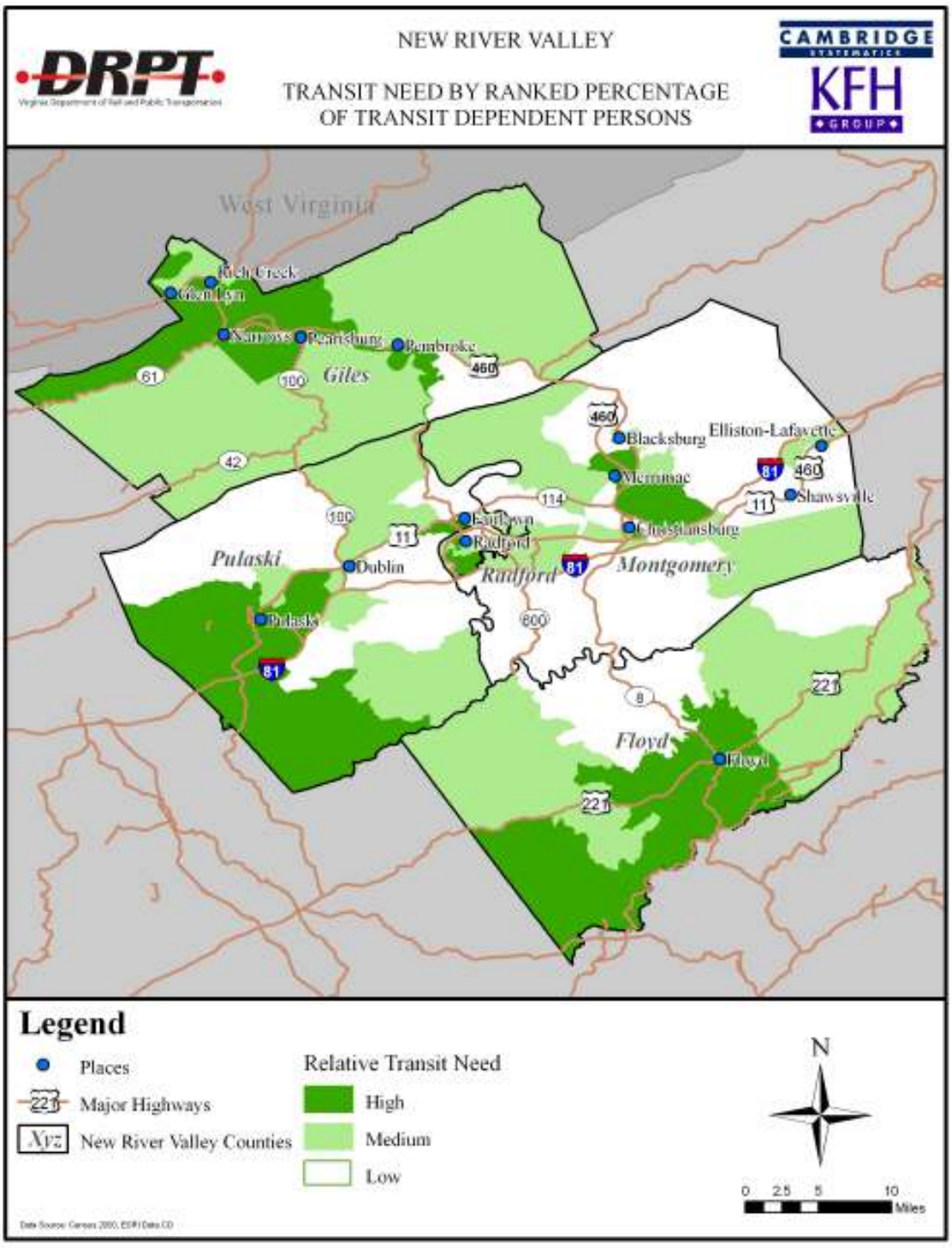


**Figure 8. Transit Need by Ranked Percentage of Transit Dependent Persons**



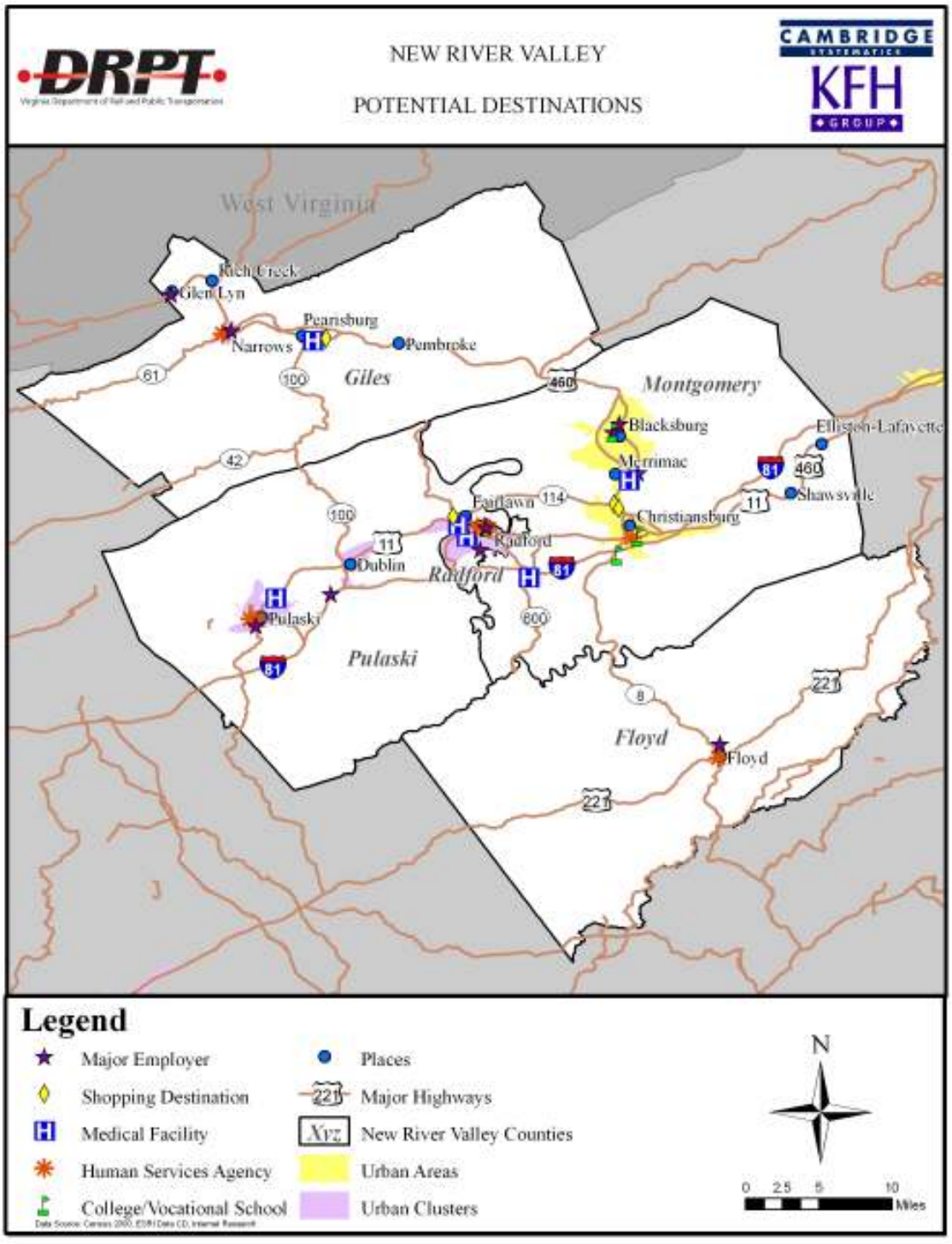
## 5.3 Potential Destinations

Potential destinations are places that residents are attracted to for business, medical services, education, community services, or recreation. They include major employers, medical facilities, educational facilities, human services agencies, and shopping destinations. These destinations were identified using local websites and resources and supplemented with research through online search engines such as Google. Input regarding key destinations obtained at the regional workshops was also incorporated into this plan. The potential destinations were then mapped with GIS to give a visual representation of popular places to which transportation may be requested by older adults, people with disabilities, and people with lower incomes. The potential destinations are shown in Figure 9; Table 2 lists the details of the potential destinations.

As shown in Figure 9:

- Potential destinations are spread throughout the PDC, mainly in towns such as Pulaski, Radford, Christiansburg, Merrimac, Blacksburg, Narrows, and Floyd.

**Figure 9. Potential Destinations**



## Table 2. Potential Destinations

### *New River Valley (PDC 4)*

| Type | Name | Address | City | County |
|---|---|---|---|---|
| College/Voc School | Life Bible College-East | 900 Life Dr | Christiansburg | Montgomery |
| College/Voc School | New River Community College | 401 Roanoke St | Christiansburg | Montgomery |
| College/Voc School | Virginia Polytechnic Institute | 210 Burrus Hall | Blacksburg | Montgomery |
| College/Voc School | Radford University | 801 E Main St | Radford | Radford City |
| Human Services Agency | Floyd County Department of Social Services (DSS) | Courthouse Bldg | Floyd | Floyd |
| Human Services Agency | Giles County Department of Social Services (DSS) | 211 Main St | Narrows | Giles |
| Human Services Agency | Montgomery County Department of Social Services (DSS) | 210 S Pepper St | Christiansburg | Montgomery |
| Human Services Agency | New River Valley Area on Aging (AAA) | 141 East Main St | Pulaski | Pulaski |
| Human Services Agency | Pulaski County Department of Social Services (DSS) | 143 Third St NW | Pulaski | Pulaski |
| Human Services Agency | Radford City Department of Social Services (DSS) | 928 W Main St | Radford | Radford City |
| Human Services Agency | Radford VEC Field Office | 206 3rd Avenue | Radford | Radford City |
| Major Employer | Federal Mogul Corp. | 300 Industrial Park Rd | Blacksburg | Montgomery |
| Major Employer | Hollingsworth & Vose Company | Floyd Industrial Park Rd | Floyd | Floyd |
| Major Employer | Celanese Acetate LLC | 3520 Virginia Ave | Narrows | Giles |
| Major Employer | American Electric Power | 100 Apco Rd | Glen Lyn | Giles |
| Major Employer | Litton Poly-Scientific F | 1213 North Main St | Blacksburg | Montgomery |
| Major Employer | Virginia Polytechnic Institute and State University | 210 Burrus Hall | Blacksburg | Montgomery |
| Major Employer | Pulaski Furniture Corporation | 301 Madison Ave South | Pulaski | Pulaski |
| Major Employer | Volvo Trucks North America Inc. | 4881 Cougar Trail Rd | Dublin | Pulaski |
| Major Employer | Kollmorgen Corporation | 201 West Rock Rd | Radford | Radford City |
| Major Employer | Radford University | 801 E Main St | Radford | Radford City |
| Medical | Giles Memorial Hospital | 1 Taylor Ave | Pearisburg | Giles |
| Medical | Carilion Giles Memorial Hospital | 1 Taylor Ave | Pearisburg | Giles |
| Medical | Carilion New River Valley Medical Center | 2900 Lamb Cir | Christiansburg | Montgomery |
| Medical | Montgomery Regional Hospital | 3700 South Main St | Blacksburg | Montgomery |
| Medical | Carilion New River Valley Medical Center | 2900 Lamb Cir | Christiansburg | Montgomery |
| Medical | Carilion Saint Albans Behavioral Health | 2900 Lamb Cir | Christiansburg | Montgomery |
| Medical | Pulaski Community Hospital | 2400 Lee Highway | Pulaski | Pulaski |
| Medical | Carilion Radford Community Hospital | 700 Randolph St | Radford | Radford City |
| Medical | St. Alban's Psychiatric Hospital | 7516 Lee Highway | Radford | Radford City |
| Shopping | Wal-Mart Supercenter Store | 160 Kinter Way | Pearisburg | Giles |
| Shopping | Wal-Mart Supercenter Store | 2400 N Franklin St | Christiansburg | Montgomery |
| Shopping | Target | 195 Conston Ave | Christiansburg | Montgomery |
| Shopping | Wal-Mart Supercenter Store | 7373 Peppers Ferry Blvd | Radford | Radford City |

## VI. Assessment of Available Transportation Services and Resources

In planning for the development of future strategies to address service gaps, it was important to first perform an assessment of the transportation services available in PDC 4. The process included collection of basic descriptive and operational data for the various programs during the initial workshop. This was achieved through a facilitated session where participants were guided through a catalog of questions. Also, a brief, two-page questionnaire was used to assist in the data collection effort, and was distributed at regional workshops. Participants who provide transportation service were requested to complete the survey and send them back for additional documentation.

Table 3 highlights the inventory of available services by provider as identified at the initial workshop. In some cases, an agency/provider was recognized as a transportation provider in the region but was not in attendance. These providers are listed and their associated information is presented by using other sources, including website information and/or via phone interview.

### Table 3. Inventory of Available Services

| Agency/ Provider | (1) Client Type | (2) # of Vehicles | (3) Trip Characteristics (Times, Destinations, etc.) | (4) # of Trips |
|---|---|---|---|---|
| a) Blacksburg Transit (BT) | General public, university transportation (contract with Virginia Tech) | 31 fixed-route buses and 10 body on chassis/vans for paratransit | Monday – Sunday, 7:00 AM – 10:00 PM (up to 2:45 AM) | 2.5 million in FY06 |
| b) Pulaski Area Transit (PAT) | General public, contract with AAA – covers 4 counties, shopping trips, meals on wheels, workshop transport | 37 vehicles (2/3 are accessible) | Deviated fixed-route and demand-response; service to Town of Pulaski, Pulaski County, and New River Community College; Monday-Friday 8:00 AM to 4:00 PM in the town of Pulaski, fare - $0.75 for a one way trip. Curb to curb service available with 24 hour notice for $2.00 per one-way trip | 65,000 annually for PAT and 45,000-50,000 annually for New River Valley program |
| c) New River Valley Community Services – Community Transit | Medicaid clients, mental health, MRSA | 60 vehicles (5 are accessible), 22 actively used for transport purposes, variety of vehicle types | Demand-response (human service/contract service) and contracts with Senior Services, Community Action and Mental Health Association of the New River Valley (MHANRV) | 32,240 annually |
| d) Goodwill Industries | Developmentally disabled clients | 7-8 vehicles in Roanoke, 7 | 3 major locations (Roanoke, Radford, and Rocky | |

| Agency/ Provider | (1) Client Type | (2) # of Vehicles | (3) Trip Characteristics (Times, Destinations, etc.) | (4) # of Trips |
|---|---|---|---|---|
| | | vehicles in Rocky Mount/Franklin County | Mount/Franklin County), service Monday – Friday, 7:00 AM – 4:00 PM | |
| e) LogistiCare (serves all of VA through 7 regions) | Broker for non-emergency transportation for Medicaid; Only transports eligible Medicaid recipients and some Medicare | | Reservations 24/7 by call center | 60,000 trips per week Statewide |
| *f) New River Community Action Head Start Services** | | | | |
| *g) Giles Health and Family Center in Pearisburg** | | | | |
| *h) Virginia Medical Transport** | | | | |
| *i) Virginia Premier Health Plan, Inc.** | Contracts to taxicabs to transport Medicare clients. | | Service within VPHP coverage area (includes entire PDC 4); service must be scheduled 2 days in advance | |
| *j) Medicaid Medallion Transportation*** | Medicaid recipients | | Medical appointments | |
| *k) New River Valley Agency on Aging—Senior Services Inc.*** | Persons age 60 and older in PDC 4, low-income individuals, and persons with disabilities | | For all services, fees charged on sliding scale and service area is PDC 4. Non-emergency medical transportation, requires advance notice. Disability transportation. Runs MedRide, described below. | |
| *l) MedRide by New River Valley Senior Services*** | Uninsured or under-insured people with no other means of transportation | | Non-emergency medical transportation; New River Valley area only; no age restrictions; fees vary according to income; service must be scheduled 2 days in advance; hours are M-F 8:30am-4:30pm | |
| *m) New River Valley DSB* | Individuals with disabilities in PDC 4 | | Employment services | |

*Not present at the workshop.
**Not present at the workshop, information from provider or community websites.

More detailed information regarding these providers can be found at their websites, where available:

BT: http://www.btransit.org/

Goodwill Industries: http://www.goodwill-the-valleys.com/

PAT: http://www2.nr.edu/transit/pat.asp

New River Valley Senior Services: http://nrvseniorservices.org/

LogistiCare: http://www.logisticare.com/

Figure 10 portrays the service area of the public transit providers in PDC 4. Blacksburg Transit (BT) and Pulaski Area Transit (PAT) are the providers that serve the general public. BT primarily serves Blacksburg and also provides an express route to Christiansburg, while PAT serves Pulaski. Route maps, where available, for the public transit providers are included in Figure 11; only BT's System Map was readily available at its website.

## Section 5310 Recipients

The following organizations were recent recipients of vehicles through the Section 5310 program:

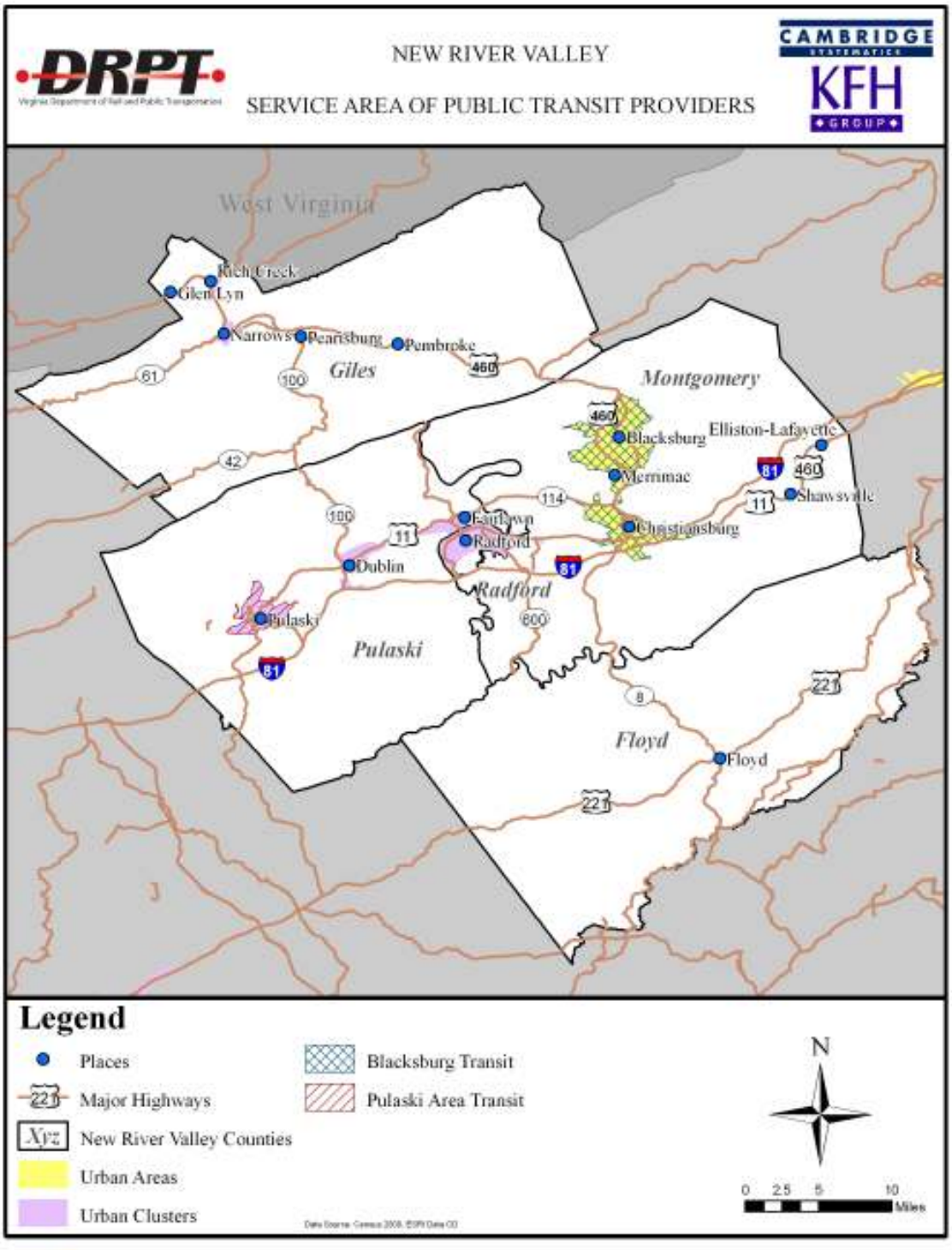
- Goodwill Industries of the Valleys
- New River Valley Community Services
- Pulaski Area Transit

## Private Transportation Providers

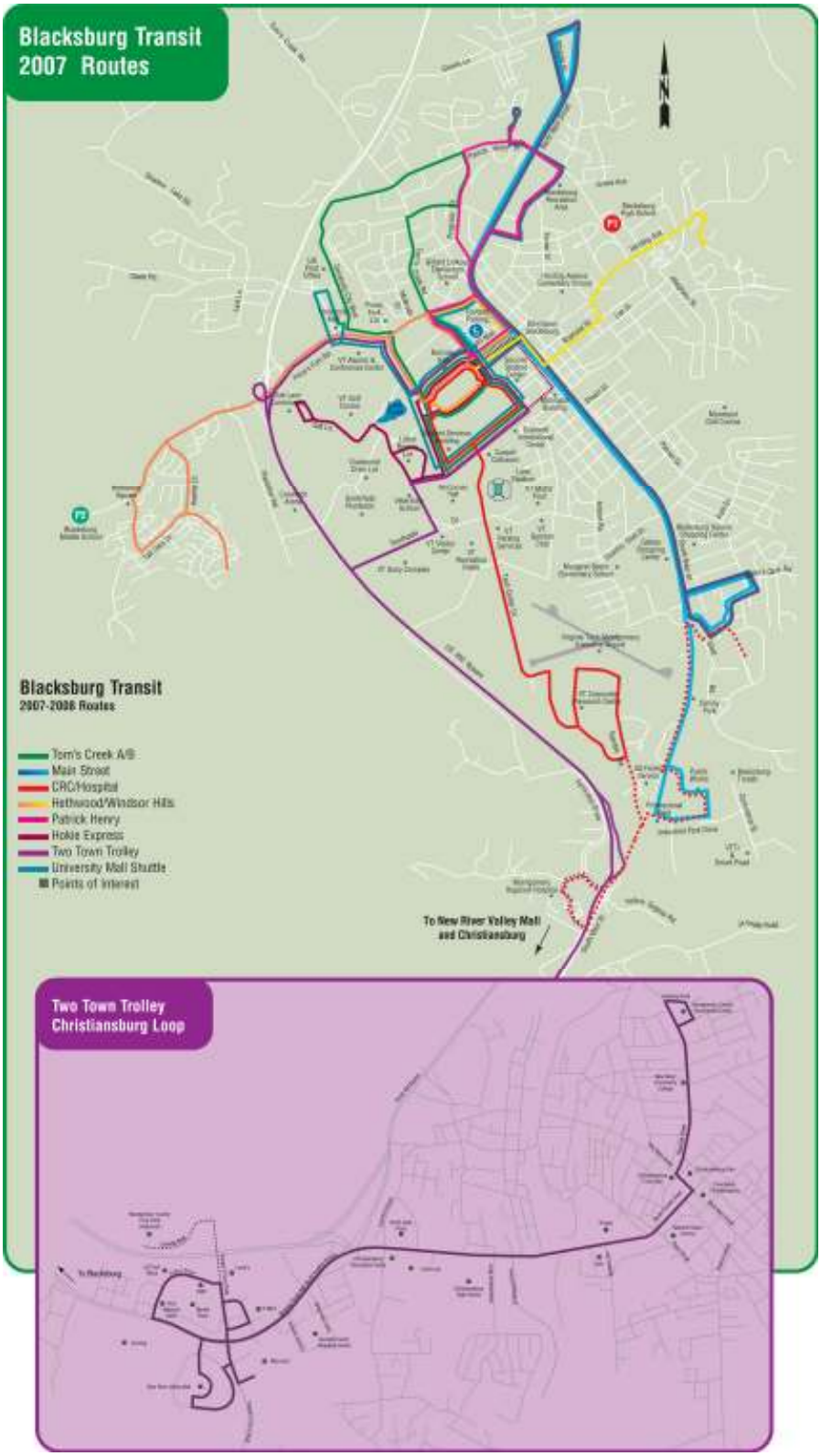
In addition, the following private transportation providers in PDC 4 were identified:

- Affordable Cab Co., Blacksburg, Christiansburg, and Radford, VA
- Blacksburg Taxi, Blacksburg, VA
- Blue & White Cabs, Pulaski, VA
- Christiansburg Cab Service, Christiansburg, VA
- Fascab (taxi service), Blacksburg, VA
- Home Ride of VA, Inc., Blacksburg (Virginia Tech) and Radford (Radford University) to Northern Virginia, Harrisonburg, Charlottesville, Richmond, and Hampton, VA
- Hooptie Ride (taxi service), Blacksburg, VA
- Lupo's Taxi Service, Narrows, VA
- T & T Taxi Services, Pulaski, VA

**Figure 10. Service Area of Public Transit Providers**



## Figure 11. Blacksburg Transit System Map




Source: Blacksburg Transit Website, http://www.btransit.org/cms.php/routes/

## VII. Assessment of Unmet Transportation Needs and Gaps

An important step in completing this plan included the identification of unmet transportation needs or service gaps. In addition to analyses based on demographics and potential destinations, local providers and key stakeholders provided input on the PDC's needs and gaps. This in-depth needs assessment provided the basis for recognizing where and how service for the region needs to be improved. In some cases, maintaining and protecting existing services is identified as a need.

At the initial Blacksburg workshop, participants from PDC 4 provided input on specific unmet transportation needs in the region during a breakout session. The input focused on the targeted population groups for the Section 5310, JARC, and New Freedom Programs (older adults, people with disabilities, and people with lower incomes). The discussion also highlighted specific need characteristics, including trip purpose, time, place/destination, information/outreach, and travel training/orientation.

The vast majority of needs identified by workshop participants were described as "cross-cutting" – a need of all three population groups. Unless otherwise noted, each of the following was identified as a cross-cutting need:

*Trip Purpose*

- Trips to medical services not covered by Medicaid.
- Appropriate vehicles through Section 5310 program to support provision of services in rural areas.

*Time*

- Transportation services on weekends, especially for people with disabilities and people with lower incomes.
- Adequate frequency of services during summer months.
- Expanded transportation options to access jobs that require second and third shift work.

*Place/Destination*

- Limited public transit in Radford City.

- Transportation gap in eastern Montgomery County.

- Transportation gap in rural areas, especially in Floyd and Giles Counties.

- Transportation provided by human service agencies constrained by jurisdictional boundaries.

- Limited or no demand-response service outside fixed-route service areas.

*Information/Outreach*

- Lack of information that MedRide is available for non-Medicaid funded trips.

- Public service announcements and education efforts at the State level through DRPT so that local providers can spend less on marketing.

- Increased education in use of services.

- Improved branding of services to create more positive image of transit.

- Outreach to doctor offices to help coordinate appointments with available transportation services.

- Educate human service agencies on available transportation services.

- Educate customers about how transportation services are provided, including how demand influences its provision and factors that constrain services.

*Travel Training/Orientation*

- Some customers need additional assistance, but concerns where providers should draw the line when providing assistance.

*Other*

- Federal and state requirements for vehicle types may not be suitable for rural environments, and need flexibility to adapt to different situations.

- Operating funds for providing services with Section 5310-funded vehicles.

In addition, the Center for Transportation Policy report noted in the Introduction included information on the unmet transportation needs in PDC 4. See Appendix A for the report's Executive Summary, which outlines the study's findings on the region's unmet needs.

## VIII. Identified Strategies

Coupled with the need to identify service gaps is the need to identify corresponding strategies intended to address service deficiencies. Based on the assessment of demographics and potential destinations, and especially the unmet transportation needs obtained from key local stakeholders in the region, a preliminary list of strategies was generated. These "strategies" differ from specific projects in that they may not be fully defined – projects would require an agency sponsor, specific expenditures, etc. The strategies were then presented at the second workshop for input and ownership. Ultimately, the 11 strategies listed below were endorsed by the workshop participants.

1. Continue to support and maintain capital needs of coordinated human service/public transportation providers.

2. Support new mobility management and coordination programs among public transportation providers and other human service agencies providing transportation.

3. Expand availability of demand-response service and specialized transportation services to provide additional trips for older adults, people with disabilities, and people with lower incomes.

4. Provide flexible transportation options and more specialized transportation services or one-to-one services through expanded use of volunteers.

5. Provide targeted shuttle services to access employment opportunities.

6. Expand outreach and information on use of available mobility options in the region.

7. Establish a ride-sharing program for long-distance medical transportation.

8. Implement new public transportation services or operate existing public transit services on a more frequent basis.

9. Expand access to taxi services and other private transportation operators.

10. Establish or expand programs that train customers, human service agency staff, medical facility personnel, and others in the use and availability of transportation services.

11. Bring new funding partners to public transit/human service transportation.

## IX. Priorities for Implementation and Potential Projects

Identification of priorities for implementation was based on feasibility for implementing the specific strategies. All of the strategies discussed during the second workshop that are eligible for funding from Section 5310, 5316, or 5317 programs are considered priorities. Based on this process, 11 specific strategies to meet these needs in the PDC 4 were identified (as noted in Section VIII) as the priorities and included in the region's CHSM Plan.

These strategies are detailed in this section to include the multiple unmet transportation needs or issues each addresses, potential projects that correspond to each strategy, and potential funding sources through the three programs that require this coordinated plan.

While potential projects that could be implemented to fulfill these strategies are included, please note that this list is not comprehensive and other projects that meet the strategy would also be considered.

**Strategy: Continue to support and maintain capital needs of coordinated human service/public transportation providers.**

To implement strategies to expand mobility options for older adults, people with disabilities, and people with lower incomes in the region, maintaining and building upon the current capital infrastructure is crucial to the community transportation network. Appropriate vehicle replacement, vehicle rehabilitation, vehicle equipment improvements, and acquisition of new vehicles will help ensure the region can maintain and build upon its current public transit and human service transportation. Emphasis should be on supporting transportation providers that are coordinating services to the maximum extent possible to ensure the most efficient use of resources in the region.

**Unmet Need/Issue Strategy Will Address:**

- Maintain existing transportation services and available mobility options for older adults, people with disabilities, and people with lower incomes.
- Appropriate vehicles through Section 5310 program to support provision of services in rural areas.
- Transportation gaps in rural areas.

**Potential Funding Sources:**

- Section 5310
- New Freedom
- JARC

**Potential Projects:**

- Capital expenses to support the provision of transportation services to meet the special needs of older adults, people with disabilities, and people with lower incomes.
- Capital needs to support new mobility management and coordination programs among public transportation providers and human service agencies providing transportation.

**Strategy: Support new mobility management and coordination programs among public transportation providers and human service agencies providing transportation.**

While some coordination of services is already in place in the region, it was recognized that there are opportunities to build upon these successful efforts and improve connections between providers. This strategy can help expand transportation access both within and outside the region. A mobility management strategy can be employed that provides the support and resources to explore these possibilities and put into action the necessary follow-up activities.

**Unmet Needs/Issues Strategy Will Address:**

- Trips to medical services not covered by Medicaid.
- Transportation gaps in rural areas.
- Transportation provided by human service agencies constrained by jurisdictional boundaries.
- Increased education in use of services.
- Improved branding of services to create more positive image of transit.
- Outreach to doctor offices to help coordinate appointments with available transportation services.
- Educate human service agencies on available transportation services.
- Educate customers about how transportation services are provided, including how demand influences its provision and factors that constrain services.

**Potential Funding Sources:**

- New Freedom
- JARC
- Section 5310
- Section 5311/ Section 5311 (f)

**Potential Projects:**

- Mobility manager to facilitate cooperation between transportation providers:
  - Helping establish inter-agency agreements for connecting services or sharing rides.
  - Exploring opportunities to share maintenance, training, and other resources.
  - Arranging trips for customers as needed.
- Facilitate access to transportation services and serve as information clearinghouse and central point of access on available public transit and human services transportation in region.
- Implement voucher program through which human service agencies are reimbursed for trips provided for another agency based on pre-determined rates or contractual arrangements.

**Strategy: Expand availability of demand-response service and specialized transportation services to provide additional trips for older adults, people with disabilities, and people with lower incomes.**

The expansion of current demand-response and specialized transportation services operated in the region is a logical strategy for improving mobility for older adults, people with disabilities, and people with lower incomes. This strategy would meet multiple unmet needs and issues while taking advantage of existing organizational structures. Operating costs -- driver salaries, fuel, vehicle maintenance, etc. -- would be the primary expense for expanding services, though additional vehicles may be necessary for providing same-day transportation services or serving larger geographic areas.

**Unmet Needs/Issues Strategy Will Address:**

- Trips to medical services not covered by Medicaid.
- Transportation services on weekends, especially for people with disabilities and people with lower incomes.
- Transportation gaps in rural areas.
- Transportation provided by human service agencies constrained by jurisdictional boundaries.
- Limited or no demand response service outside fixed route service areas.

**Potential Funding Sources:**

- New Freedom
- JARC
- Section 5310
- Section 5311/ Section 5311 (f)

**Potential Projects:**

- Implement new or expand current demand-response systems to serve additional trips.
- Expand demand-response services for customers who do not qualify for Medicaid-funded transportation.
- Expand hours, days, and/or service area of current demand response systems to meet additional transportation needs.

**Strategy: Provide flexible transportation options and more specialized transportation services or one-to-one services through expanded use of volunteers.**

A variety of transportation services are needed to meet the mobility needs of older adults, people with disabilities, and people with lower incomes in the region. Customers may need more specialized services beyond those typically provided through general public transit services, and the rural nature of the region is often not conducive for shared ride services. Therefore, the use of volunteers may offer transportation options that are difficult to provide through public transit and human service agency transportation. Volunteers can also provide a more personal and one-to-one transportation service for customers who may require additional assistance. MedRide, run by New River Valley Senior Services, exemplifies an existing program in the region that utilizes volunteers.

**Unmet Needs/Issues Strategy Will Address:**

- Some customers need additional assistance, but concerns where providers should draw line when providing assistance.
- Transportation gaps in rural areas.
- Trips to medical services not covered by Medicaid.

**Potential Funding Sources:**

- New Freedom

**Potential Projects:**

- Implement new or expanded volunteer driver program to meet specific geographic, trip purpose, or timeframe needs.

**Strategy: Provide targeted shuttle services to access employment opportunities.**

Limited transportation services to access employment opportunities could be addressed through the implementation of shuttle services designed around concentrated job centers. These concentrated job opportunities provide central employment destinations that could potentially be served via targeted shuttle services. Locating a critical mass of workers is the key for this strategy to be effective. This strategy may also provide a mechanism for employer partnerships.

**Unmet Needs/Issues Strategy Will Address:**

- Expanded transportation options to access jobs that require second and third shift work.

**Potential Funding Sources:**

- JARC

**Potential Projects:**

- Operating assistance to fund specifically-defined, targeted shuttle services.
- Capital assistance to purchase vehicles to provide targeted shuttle services.

**Strategy: Expand outreach and information on use of available mobility options in the region.**

A greater emphasis can be placed not just on the coordination of actual services, but also on outreach and information sharing to ensure people with limited mobility are aware of the transportation services available to them. Possibilities include a more formal organizational structure for coordination, such as a mobility manager whose activities could include the promotion of available transportation services.

**Unmet Needs/Issues Strategy Will Address:**

- Increased education in use of services.
- Improved branding of services to create more positive image of transit.
- Outreach to doctor offices to help coordinate appointments with available transportation services.
- Educate human service agencies on available transportation services.
- Educate customers about how transportation services are provided, including how demand influences its provision and factors that constrain services.

**Potential Funding Sources:**

- New Freedom
- JARC

**Potential Projects:**

- Mobility manager to facilitate access to transportation services and serve as information clearing-house on available public transit and human services transportation in region.
- Implement new or expand outreach programs that provide customers and human service agency staff with training and assistance in use of current transportation services.
- Implement mentor/advocate program to connect current riders with potential customers for training in use of services.

**Strategy: Establish a ride-sharing program for long-distance medical transportation.**

This strategy would use this commuter-oriented model as a basis for developing a ride-sharing program for long distance medical trips. A database of potential drivers and riders could be kept with a central "mobility manager," who would match the trip needs with the available participating drivers. The riders would share the expenses with the drivers on a per-mile basis (i.e. similar to mileage reimbursement). This strategy could be a cost-effective way to provide long-distance medical trips without sending a human service or public transit vehicle out of the region for a day. This strategy could be implemented in conjunction with a broader mobility management program.

**Unmet Needs/Issues Strategy Will Address:**

- Trips to medical services not covered by Medicaid.

**Potential Funding Sources:**

- New Freedom
- Section 5311 / Section 5311(f)

**Potential Projects:**

- Development of a ride-share matching database that could be used to effectively match potential drivers with people who need rides.
- Development of volunteer driver program to provide long distance medical trips.
- Funding of new inter-regional routes or connecting services to link with the national network of intercity bus services.

**Strategy: Implement new public transportation services or operate existing public transit services on a more frequent basis.**

Documented in Section VI, the public transit services in PDC 4 outside the Blacksburg and Pulaski areas are limited from both geographic and time perspectives. Expanded hours of service and area coverage should be considered to expand mobility options in the region, and where feasible transition demand–response services to scheduled services.

**Unmet Needs/Issues Strategy Will Address:**

- Transportation services on weekends, especially for people with disabilities and people with lower incomes.
- Adequate frequency of services during summer months.
- Expanded transportation options to access jobs that require second and third shift work.
- Limited public transit in Radford City.

**Potential Funding Sources:**

- JARC
- Section 5310
- New Freedom
- Section 5307
- Section 5311 / Section 5311(f)

**Potential Projects:**

- Increase frequency of public transit services as possible.
- Convert demand-response services to fixed schedule or fixed route services as possible.

**Strategy: Expand access to taxi services and other private transportation operators.**

The region is served by several taxi services and private transportation providers, as outlined in Section VI. For evenings and weekends and for same-day transportation needs, these services may be the best options for area residents; albeit one that is more costly to use. By subsidizing user costs, possibly through a voucher program, there can be expanded access to taxis and other private transportation services. This approach has been employed successfully in other rural areas of the country, particularly as a means to provide people with disabilities with more flexible transportation services.

**Unmet Needs/Issues Strategy Will Address:**

- Transportation services on weekends, especially for people with disabilities and people with lower incomes.

**Potential Funding Sources:**

- New Freedom

**Potential Projects:**

- Implement voucher program to subsidize rides for taxi trips or trips provided by private operators.

**Strategy: Establish or expand programs that train customers, human service agency staff, medical facility personnel, and others in the use and availability of transportation services.**

In addition to expanding transportation options in the region, it is important that customers, as well as caseworkers, agency staff, and medical facility personnel that work with older adults, people with disabilities, and people with low incomes, are familiar with available transportation services. Efforts can include travel training programs to help individuals use public transit services and outreach programs to ensure people helping others with their transportation issues are aware of mobility options in the region. In addition, the demand for transportation services to dialysis treatment facilities necessitates the need for a strong dialogue between transportation providers and dialysis locations so that treatment openings and available transportation are considered simultaneously.

**Unmet Needs/Issues Strategy Will Address:**

- Some customers need additional assistance, but concerns where providers should draw line when providing assistance.
- Lack of information that MedRide is available for non-Medicaid funded trips.
- Outreach to doctor offices to help coordinate appointments with available transportation services.
- Educate human service agencies on available transportation services.

**Potential Funding Sources:**

- New Freedom
- JARC

**Potential Projects:**

- Implement new or expand outreach programs that provide customers and human service agency staff with training and assistance in use of current transportation services.
- Implement mentor/advocate program to connect current riders with potential customers for training in use of services.

**Strategy: Bring new funding partners to public transit/human service transportation.**

The demand for public transit-human service transportation is growing daily. One of the key obstacles the industry faces is how to pay for additional service. This strategy would meet multiple unmet needs and issues by tackling non-traditional sources of funding. Hospitals, supermarkets, and retailers who want the business of the region's riders may be willing to pay for part of the cost of transporting those riders to their sites. This approach is applicable to both medical and retail establishments already served, as well as new businesses.

**Unmet Needs/Issues Strategy Will Address:**

- Transportation services on weekends, especially for people with disabilities and people with lower incomes.
- Expanded transportation options to access jobs that require second and third shift work.

**Potential Funding Sources:**

- JARC

**Potential Projects:**

- Employer funding support programs, either directly for services and/or for local share.
- Employer sponsored transit pass programs that allow employees to ride at reduced rates.
- Partnerships with private industry, i.e. retailers and medical centers.
- Partnerships with private providers of transportation, i.e. intercity bus operators and taxi operators.

## X. Plan Adoption Process

As noted in Section IV, participants from the regional workshops were involved throughout the planning process, and reviewed and commented on initial drafts that included the assessment of transportation services, assessment of transportation needs and gaps, and proposed strategies and potential projects. Ultimately, these coordinated planning participants formally discussed and agreed upon the identified strategies in this plan. At the third workshop, they provided a more formal endorsement through a Statement of Participation that is included in Appendix G.

Additionally, each plan will become a section within the PDC's Regional Rural Long Range Plan (RLRP) which is required by the Virginia Department of Transportation (VDOT). The intent is a regional transportation plan in rural areas that complements those in the metropolitan areas of the State. The development and components of each RLRP will include public outreach and recommendation development, as well as public endorsement and regional adoption.

## XI. Ongoing and Future Arrangements for Plan Updates

In addition to developing this coordinated public transit-human services transportation plan that fulfills the FTA requirements, DRPT will be working with the region on an ongoing structure to serve as the foundation for future coordinated transportation planning efforts.

Similar to the process for development of the CHSM Plan, this structure will be determined through input with a diverse group of stakeholders that represent transportation, aging, disability, social service, and other appropriate organizations in the region, including participants from the first two workshops. While formal responsibilities and organizational roles will be determined locally, it is anticipated this structure will:

- Lead updates of the *Coordinated Human Service Mobility Plan* for PDC 4 based on local needs (but at the minimum FTA required cycle).

- Provide input and assist public transit and human service transportation providers in establishing priorities with regard to community transportation services.

- Review and discuss coordination strategies in the region and provide recommendations for possible improvements to help expand mobility options in the region.

- Provide input on applications for funding through the Section 5310, JARC, and New Freedom competitive selection process.

## Appendix A – New River Valley and Roanoke Valley Public Mobility Project Final Report – Executive Summary

The Center for Transportation Policy (CTP) in cooperation with the New River Valley Planning District Commission and Roanoke Valley- Allegheny Regional Commission and the Roanoke Valley Area Metropolitan Planning Organization and the Blacksburg/ Christiansburg/ Montgomery area Metropolitan Planning Organizations have examined the region's human services transportation resources and needs, facilitated a community summit, and prepared this report on public mobility in this region. The report focuses on ways to coordinate human service transportation. The full report includes a discussion of coordination literature; population demographics; findings of a web based survey; interviews and case studies of existing human service transportation efforts. This summary presents our findings and recommends an action agenda for the region.

**Finding 1:**
**There is a need for additional human service transportation for transportation disadvantaged populations in the region.**

As is demonstrated by the later discussion of survey and interview responses and the review of area needs assessments, there exists a definite need for additional human services transportation particularly for the transportation disadvantaged; the elderly, disabled, and the poor. This need is intensified by the size and rural nature of the Roanoke, Allegheny, and New River Valley area. While several urban areas have access to public transportation, residents of smaller communities and those living in the outlying areas of the region do not.

**Finding 2:**
**There are sufficient transportation providers to provide human service transportation if sufficient resources (funds) are made available.**

CTP has identified the regions' transportation providers. There are five public transportation providers in the two planning districts; Valley Metro, Blacksburg Transit, Smart Way Bus, Pulaski Transit, Radford Tartan Transit. There are three major community service transportation providers; Roanoke Valley- Alleghany Regional Commission's RIDE Solutions, RADAR, and New River Valley Senior Services. CTP found a strong desire among agencies to increase their current level of services combined with a willingness to coordinate with other agencies. This opportunity is tempered by the lack of funding needed for expanded services. With additional resources and continued commitment to integrated coordination, the human service transportation needs of the region can be met.

**Finding 3:**
**There is sufficient interest in coordination of services among current transportation providers and human service agencies to achieve a coordinated human service**

**transportation environment. Ongoing coordination is necessary to meet the demand for human service transportation.**

Service providers and human service agencies in the region have a demonstrated history of commitment to coordinated transportation efforts. This commitment is demonstrated by the numerous ongoing coordinated efforts currently in place throughout the region. As noted, a lack of resources prohibits increased levels of service in the region. If increased resources become available, these funds need to be combined with enhanced regional human service transportation coordination. Any future efforts need to be maintained and supported by regional leaders.

**Finding 4:**
**A region-wide coordination effort is possible. To succeed, such an effort requires sustained leadership and commitment.**

The research, including the survey, interview, literature review and the case studies, have provided the research team with sufficient information on the next steps to transportation coordination in the Roanoke-Alleghany/ New River Valley area. Many agencies are willing to coordinate in some form but have not because of a lack of funding and leadership. In order for coordination efforts to succeed, a clear champion of coordination efforts who will lead the efforts and coordinate services in the two planning districts needs to be identified.

**Recommendations:**

Coordination can be achieved in a variety of ways. The CTP study suggests coordination can best be implemented under the following conditions. The region should:

- Identify a leadership committee of transportation providers and human service agencies. The group should designate one person as the "champion" who will facilitate meetings, ensure momentum is continuous, serve as spokesperson, and who will be looked to as a "neutral" participant without an organizational agenda.
- Begin monthly meetings specifically designed to move toward coordination. *The Center for Transportation Policy is prepared to initiate such monthly meetings until such time as another organization can take the responsibility.*
- Bring the funding agencies to the table.
- Enlist and designate RADAR & the New River Valley Senior Services Agency as the organizations to lead coordinative service provision in their respective service areas. Initially, we suggest these two agencies begin to serve as the interim brokerage agencies for their respective service areas.
- Bring RouteMatch technology into the coordinative effort for the entire region
- Create a 501 (C) 3 organization to provide a centralized point of administration of a region-wide brokerage system.

- Given the rural character of the region, we believe an aggressive and coordinated "car ownership" program would be highly desirable[2].

**Rationale:**

There are several possible ways to achieve coordination, each of which is discussed in the full report. Nevertheless, the region is ripe for a region-wide coordination effort to begin. The easiest and fastest way to begin, in our judgment, is to establish a regional brokerage system. Under a broker system, agency clients call one number, the broker, to arrange for transportation. The broker then assign trips to available agency service providers; agency vehicles, taxis, or contracted services. The broker also is responsible for looking at fixed-route services and could possibly assign the client to that route if possible. The broker is responsible for getting each client, regardless of agency, where they need to be. The broker also takes responsibility for billing. Pooling regional resources will produce an economy of scale. By using RADAR and NRVSS as the interim lead agencies for brokerage services there is not a need to start a brokerage system from the ground up as both the capital and knowledge is already in place for such an effort.

In order for coordination to be successful, agencies and providers in the area must buy-into the idea of coordination and the brokerage system. The agencies must believe that this option is the best option available and that it will be successful. All agencies must be willing to participate in the coordinated effort. Without involvement from all agencies, the system can not run effectively. Secondly, information about the system and access to the system must be widely distributed and readily available. Access to the system should be as varied as possible – including phone, internet, signage, and/or informational kiosks.

Once the basic system is in place, other details of technology, recordkeeping, "smart card" utilization and logistical details would become agenda items for discussion by the leadership committee and/or its successor agency.

During the course of this study, the U.S. Federal Transit Administration issued a call for proposals to plan and demonstrate an Enhanced Human Service Transportation Model. The Center for Transportation Policy and the Roanoke Valley-Allegheny Regional Commission applied for participation in Phase 1—System Development and Design. In the event we are fortunate enough to receive that funding, it will be possible to develop a specific plan for implementation. In the event the proposal is not funded, we believe the regional agencies can, over time, achieve enhanced human service transportation.

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2 Representatives from New River Valley Community Action noted during an interview that their agency is working on a car lot idea. In essence they would serve as a not for profit used car dealer so that they can offer for sale subsidized cars to low-income individuals.

## Appendix B – Final FTA Guidance on Coordinated Planning Requirements

*The following excerpt is from the final guidance from the Federal Transit Administration (FTA) on the Elderly Individuals and Individuals with Disabilities (Section 5310), Job Access Reverse Commute (JARC – Section 5316) and New Freedom (Section 5317) programs. (Effective May 1, 2007)*

*Final Circulars: http://www.fta.dot.gov/laws/leg_reg_circulars_guidance.html*

*Final Register Notices: http://www.fta.dot.gov/laws/leg_reg_federal_register.html*

**COORDINATED PLANNING**

1. THE COORDINATED PUBLIC TRANSIT-HUMAN SERVICES TRANSPORTATION PLAN. Federal transit law, as amended by SAFETEA–LU, requires that projects selected for funding under the Elderly Individuals and Individuals with Disabilities (Section 5310), Job Access and Reverse Commute (JARC), and New Freedom programs be "derived from a locally developed, coordinated public transit-human services transportation plan" and that the plan be "developed through a process that includes representatives of public, private, and non-profit transportation and human services providers and participation by members of the public." The experiences gained from the efforts of the Federal Interagency Coordinating Council on Access and Mobility (CCAM), and specifically the United We Ride (UWR) Initiative, provide a useful starting point for the development and implementation of the local public transit-human services transportation plan required under the Section 5310, JARC and New Freedom Programs. Many States have established UWR plans that may form a foundation for a coordinated plan that includes the required elements outlined in this chapter and meets the requirements of 49 U.S.C. 5317.

2. DEVELOPMENT OF THE COORDINATED PUBLIC TRANSIT-HUMAN SERVICES TRANSPORTATION PLAN.

    a. Overview. A locally developed, coordinated, public transit-human services transportation plan ("coordinated plan") identifies the transportation needs of individuals with disabilities, older adults, and people with low incomes, provides strategies for meeting those local needs, and prioritizes transportation services for funding and implementation. Local plans may be developed on a local, regional, or statewide level. The decision as to the boundaries of the local planning areas should be made in consultation with the State, designated recipient and the metropolitan planning organization (MPO), where applicable. The agency leading the planning process is decided locally and does not have to be the designated recipient.

    In urbanized areas where there are multiple designated recipients, there may be multiple plans and each designated recipient will be responsible for the competitive selection of projects in the designated recipient's area. A coordinated plan should maximize the programs' collective coverage by minimizing duplication of services. Further, a coordinated plan must be

developed through a process that includes representatives of public and private and non-profit transportation and human services transportation providers, and participation by members of the public. Members of the public should include representatives of the targeted population(s) including individuals with disabilities, older adults, and people with low incomes. While the plan is only required in communities seeking funding under one or more of the three specified FTA programs, a coordinated plan should also incorporate activities offered under other programs sponsored by Federal, State, and local agencies to greatly strengthen its impact.

b. Required Elements. Projects competitively selected for funding shall be derived from a coordinated plan that minimally includes the following elements at a level consistent with available resources and the complexity of the local institutional environment:

(1) An assessment of available services that identifies current transportation providers (public, private, and non-profit);

(2) An assessment of transportation needs for individuals with disabilities, older adults, and people with low incomes. This assessment can be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts, and gaps in service (Note: If a community does not intend to seek funding for a particular program (Section 5310, JARC, or New Freedom), then the community is not required to include an assessment of the targeted population in its coordinated plan);

(3) Strategies, activities and/or projects to address the identified gaps between current services and needs, as well as opportunities to improve efficiencies in service delivery; and

(4) Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.

Note: FTA will consider plans developed before the issuance of final program circulars to be an acceptable basis for project selection for FY 2007 if they meet minimum criteria. Plans for FY 2007 should include 1) an assessment of available services; 2) an assessment of needs; and 3) strategies to address gaps for target populations; however, FTA recognizes that initial plans may be less complex in one or more of these elements than a plan developed after the local coordinated planning process is more mature. Addendums to existing plans to include these elements will also be sufficient for FY 2007. Plans must be developed in good faith in coordination with appropriate planning partners and with opportunities for public participation.

c. Local Flexibility in the Development of a Local Coordinated Public Transit-Human Services Transportation Plan. The decision for determining which agency has the lead for the development and coordination of the planning process should be made at the State, regional, and local levels. FTA recognizes the importance of local flexibility in developing plans for human service transportation. Therefore, the lead agency for the coordinated planning

process may be different from the agency that will serve as the designated recipient. Further, FTA recognizes that many communities have conducted assessments of transportation needs and resources regarding individuals with disabilities, older adults, and/or people with low incomes. FTA also recognizes that some communities have taken steps to develop a comprehensive, coordinated, human service transportation plan either independently or through United We Ride efforts. FTA supports communities building on existing assessments, plans and action items. As all new Federal requirements must be met, however, communities may need to modify their plans or processes as necessary to meet these requirements. FTA encourages communities to consider inclusion of new partners, new outreach strategies, and new activities related to the targeted programs and populations.

Plans will vary based upon the availability of resources and the existence of populations served under these programs. A rural community may develop its plans based on perceived needs emerging from the collaboration of the planning partners, whereas a large urbanized community may use existing data sources to conduct a more formal analysis to define service gaps and identify strategies for addressing the gaps.

This type of planning is also an eligible activity under three other FTA programs—the Metropolitan Planning (Section 5303), Statewide Planning (Section 5304), and Urbanized Area Formula (Section 5307) programs, all of which may be used to supplement the limited (10 percent) planning and administration funding under this program. Other resources may also be available from other entities to fund coordinated planning activities. All "planning" activities undertaken in urbanized areas, regardless of the funding source, must be included in the Unified Planning Work Program (UPWP) of the applicable MPO.

d. Tools and Strategies for Developing a Coordinated Plan. States and communities may approach the development of a coordinated plan in different ways. The amount of available time, staff, funding, and other resources should be considered when deciding on specific approaches. The following is a list of potential strategies for consideration.

(1) Community planning session. A community may choose to conduct a local planning session with a diverse group of stakeholders in the community. This session would be intended to identify needs based on personal and professional experiences, identify strategies to address the needs, and set priorities based on time, resources, and feasibility for implementation. This process can be done in one meeting or over several sessions with the same group. It is often helpful to identify a facilitator to lead this process. Also, as a means to leverage limited resources and to ensure broad exposure, this could be conducted in cooperation or coordination with the applicable metropolitan or statewide planning process.

(2) Self-assessment tool. *The Framework for Action: Building the Fully Coordinated Transportation System*, developed by FTA and available at www.unitedweride.gov, helps stakeholders realize a shared perspective and build a roadmap for moving forward together. The self-assessment tool focuses on a series of core elements that are represented in categories

of simple diagnostic questions to help groups in States and communities assess their progress toward transportation coordination based on standards of excellence. There is also a *Facilitator's Guide* that offers detailed advice on how to choose an existing group or construct an ad hoc group. In addition, it describes how to develop elements of a plan, such as identifying the needs of targeted populations, assessing gaps and duplications in services, and developing strategies to meet needs and coordinate services.

(3) Focus groups. A community could choose to conduct a series of focus groups within communities that provides opportunity for greater input from a greater number of representatives, including transportation agencies, human service providers, and passengers. This information can be used to inform the needs analysis in the community. Focus groups also create an opportunity to begin an ongoing dialogue with community representatives on key issues, strategies, and plans for implementation.

(4) Survey. The community may choose to conduct a survey to evaluate the unmet transportation needs within a community and/or available resources. Surveys can be conducted through mail, e-mail, or in-person interviews. Survey design should consider sampling, data collection strategies, analysis, and projected return rates. Surveys should be designed taking accessibility considerations into account, including alternative formats, access to the internet, literacy levels, and limited English proficiency.

(5) Detailed study and analysis. A community may decide to conduct a complex analysis using inventories, interviews, GIS mapping, and other types of research strategies. A decision to conduct this type of analysis should take into account the amount of time and funding resources available, and communities should consider leveraging State and MPO resources for these undertakings.

3. PARTICIPATION IN THE COORDINATED PUBLIC TRANSIT-HUMAN SERVICES TRANSPORTATION PLANNING PROCESS. Recipients shall certify that the coordinated plan was developed through a process that included representatives of public, private, and non-profit transportation and human services providers, and participation by members of the public. Note that the required participants include not only transportation providers but also providers of human services, and members of the public (e.g., individuals with disabilities, older adults, and individuals with low incomes) who can provide insights into local transportation needs. It is important that stakeholders be included in the development and implementation of the local coordinated public transit-human services transportation plan. A planning process in which stakeholders provide their opinions but have no assurance that those opinions will be considered in the outcome does not meet the requirement of 'participation.' Explicit consideration and response should be provided to public input received during the development of the coordinated plan. Stakeholders should have reasonable opportunities to be actively involved in the decision-making process at key decision points, including, but not limited to, development of the proposed coordinated plan document. The following possible strategies facilitate appropriate inclusion:

a. Adequate Outreach to Allow for Participation. Outreach strategies and potential participants will vary from area to area. Potential outreach strategies could include notices or flyers in centers of community activity, newspaper or radio announcements, e-mail lists, website postings, and invitation letters to other government agencies, transportation providers, human services providers, and advocacy groups. Conveners should note that not all potential participants have access to the Internet and they should not rely exclusively on electronic communications. It is useful to allow many ways to participate, including in-person testimony, mail, e-mail, and teleconference. Any public meetings regarding the plan should be held in a location and time where accessible transportation services can be made available, and adequately advertised to the general public using techniques such as those listed above. Additionally, interpreters for individuals with hearing impairments and English as a second language and accessible formats (e.g., large print, Braille, electronic versions) should be provided as required by law.

b. Participants in the Planning Process. Metropolitan and statewide planning under 49 U.S.C. 5303 and 5304 require consultation with an expansive list of stakeholders. There is significant overlap between the lists of stakeholders identified under those provisions (e.g., private providers of transportation, representatives of transit users, and representatives of individuals with disabilities) and the organizations that should be involved in preparation of the coordinated plan.

The projects selected for funding under the Section 5310 , JARC, and New Freedom Programs must be "derived from a locally developed, coordinated public transit-human services transportation plan" that was "developed through a process that includes representatives of public, private, and non-profit transportation and human services providers and participation by members of the public." The requirement for developing the local public transit-human services transportation plan is intended to improve services for people with disabilities, older adults, and individuals with low incomes. Therefore, individuals, groups and organizations representing these target populations should be invited to participate in the coordinated planning process. Consideration should be given to including groups and organizations such as the following in the coordinated planning process if present in the community:

(1) Transportation partners:

(a) Area transportation planning agencies, including MPOs, Councils of Government (COGs), Rural Planning Organizations (RPOs), Regional Councils, Associations of Governments, State Departments of Transportation, and local governments;

(b) Public transportation providers (including Americans with Disabilities Act (ADA) paratransit providers and agencies administering the projects funded under FTA urbanized and nonurbanized programs);

(c) Private transportation providers, including private transportation brokers, taxi operators, van pool providers, school transportation operators, and intercity bus operators;

(d) Non-profit transportation providers;

(e) Past or current organizations funded under the JARC, Section 5310, and/or the New Freedom Programs; and

(f) Human service agencies funding, operating, and/or providing access to transportation services.

(2) Passengers and advocates:

(a) Existing and potential riders, including both general and targeted population passengers (individuals with disabilities, older adults, and people with low incomes);

(b) Protection and advocacy organizations;

(c) Representatives from independent living centers; and

(d) Advocacy organizations working on behalf of targeted populations.

(3) Human service partners:

(a) Agencies that administer health, employment, or other support programs for targeted populations. Examples of such agencies include but are not limited to Departments of Social/Human Services, Employment One-Stop Services; Vocational Rehabilitation, Workforce Investment Boards, Medicaid, Community Action Programs (CAP), Agency on Aging (AoA); Developmental Disability Council, Community Services Board;

(b) Non-profit human service provider organizations that serve the targeted populations;

(c) Job training and placement agencies;

(d) Housing agencies;

(e) Health care facilities; and

(f) Mental health agencies.

(4) Other:

(a) Security and emergency management agencies;

(b) Tribes and tribal representatives;

(c) Economic development organizations;

(d) Faith-based and community-based organizations;

(e) Representatives of the business community (e.g., employers);

(f) Appropriate local or State officials and elected officials;

(g) School districts; and

(h) Policy analysts or experts.

Note: Participation in the planning process will not bar providers (public or private) from bidding to provide services identified in the coordinated planning process. This planning process differs from the competitive selection process, and it differs from the development and issuance of a Request for Proposal (RFP) as described in the Common Grant Rule (49 CFR part 18).

c. Levels of Participation. The suggested list of participants above does not limit participation by other groups, nor require participation by every group listed. Communities will have different types of participants depending on population and size of community, geographic location, and services provided at the local level. It is expected that planning participants will have an active role in the development, adoption, and implementation of the plan. Participation may remain low even though a good faith effort is made by the lead agency to involve passengers, representatives of public, private, and non-profit transportation and human services providers, and others. The lead agency convening the coordinated planning process should document the efforts it utilized, such as those suggested above, to solicit involvement.

In addition, Federal, State, regional, and local policy makers, providers, and advocates should consistently engage in outreach efforts that enhance the coordinated process, because it is important that all stakeholders identify the opportunities that are available in building a coordinated system. To increase participation at the local levels from human service partners, State Department of Transportation offices are encouraged to work with their partner agencies at the State level to provide information to their constituencies about the importance of partnering with human service transportation programs and the opportunities that are available through building a coordinated system.

d. Adoption of a Plan. As a part of the local coordinated planning process, the lead agency in consultation with participants should identify the process for adoption of the plan. A strategy for adopting the plan could also be included in the designated recipient's Program Management Plan (PMP) further described in Chapter VII.

FTA will not formally review and approve plans. The designated recipient's grant application will document the plan from which each project listed is derived, including the lead agency, the date of adoption of the plan, or other appropriate identifying information. This may be done by citing the section of the plan or page references from which the project is derived.

4. RELATIONSHIP TO OTHER TRANSPORTATION PLANNING PROCESSES.

a. Relationship Between the Coordinated Planning Process and the Metropolitan and Statewide Transportation Planning Processes. The coordinated plan can either be developed separately from the metropolitan and statewide transportation planning processes and then incorporated into the broader plans, or be developed as a part of the metropolitan and statewide transportation planning processes. If the coordinated plan is not prepared within the broader process, the lead agency for the coordinated plan should

ensure coordination and consistency between the coordinated planning process and metropolitan or statewide planning processes. For example, planning assumptions should not be inconsistent.

Projects identified in the coordinated planning process, and selected for FTA funding through the competitive selection process must be incorporated into both the Transportation Improvement Program (TIP) and Statewide Transportation Improvement Program (STIP) in urbanized areas with populations of 50,000 or more; and incorporated into the STIP for nonurbanized areas under 50,000 in population. In some areas, where the coordinated plan or competitive selection is not completed in a timeframe that coincides with the development of the TIP/STIP, the TIP/STIP amendment processes will need to be utilized to include competitively selected projects in the TIP/STIP before FTA grant award.

The lead agency developing the coordinated plan should communicate with the relevant MPOs or State planning agencies at an early stage in plan development. States with coordination programs may wish to incorporate the needs and strategies identified in local coordinated plans into statewide coordination plans.

Depending upon the structure established by local decision-makers, the coordinated planning process may or may not become an integral part of the metropolitan or statewide transportation planning processes. State and local officials should consider the fundamental differences in scope, time horizon, and level of detail between the coordinated planning process and the metropolitan and statewide transportation planning processes. However, there are important areas of overlap between the planning processes, as well. Areas of overlap represent opportunities for sharing and leveraging resources between the planning processes for such activities as: (1) needs assessments based on the distribution of targeted populations and locations of employment centers, employment-related activities, community services and activities, medical centers, housing and other destinations; (2) inventories of transportation providers/resources, levels of utilization, duplication of service and unused capacity; (3) gap analysis; (4) any eligibility restrictions; and (5) opportunities for increased coordination of transportation services. Local communities may choose the method for developing plans that best fits their needs and circumstances.

b. Relationship Between the Requirement for Public Participation in the Coordinated Plan and the Requirement for Public Participation in Metropolitan and Statewide Transportation Planning. SAFETEA–LU strengthened the public participation requirements for metropolitan and statewide transportation planning. Title 49 U.S.C. 5303(i)(5) and 5304(f)(3), as amended by SAFETEA–LU, require MPOs and States to engage the public and stakeholder groups in preparing transportation plans, TIPs, and STIPs. "Interested parties" include, among others, affected public agencies, private providers of transportation, representatives of users of public transportation, and representatives of individuals with disabilities.

MPOs and/or States may work with the lead agency developing the coordinated plan to coordinate schedules, agendas, and strategies of the

coordinated planning process with metropolitan and statewide planning in order to minimize additional costs and avoid duplication of efforts. MPOs and States must still provide opportunities for participation when planning for transportation related activities beyond the coordinated public transit-human services transportation plan.

c. Cycle and Duration of the Coordinated Plan. At a minimum, the coordinated plan should follow the update cycles for metropolitan transportation plans (i.e., four years in air quality nonattainment and maintenance areas and five years in air quality attainment areas). However, communities and States may update the coordinated plan to align with the competitive selection process based on needs identified at the local levels. States, MPOs, designated recipients, and public agencies that administer or operate major modes of transportation should set up a cycle that is conducive to and coordinated with the metropolitan and statewide planning processes, to ensure that selected projects are included in the TIP and STIP, to receive funds in a timely manner.

d. Role of Transportation Providers that Receive FTA Funding Under the Urbanized and Other Than Urbanized Formula Programs in the Coordinated Planning Process. Recipients of Section 5307 and Section 5311 assistance are the "public transit" in the public transit-human services transportation plan and their participation is assumed and expected. Further, 49 U.S.C. 5307(c)(5) requires that, "Each recipient of a grant shall ensure that the proposed program of projects (POP) provides for the coordination of public transportation services … with transportation services assisted from other United States Government sources." In addition, 49 U.S.C. 5311(b)(2)(C)(ii) requires the Secretary of the DOT to determine that a State's Section 5311 projects "provide the maximum feasible coordination of public transportation service … with transportation service assisted by other Federal sources." Finally, under the Section 5311 program, States are required to expend 15 percent of the amount available to support intercity bus service. FTA expects the coordinated planning process in rural areas to take into account human service needs that require intercity transportation.

## Appendix C – Mobility Management – Eligible Activities and Potential Projects

Supporting new mobility management and coordination programs among public transportation providers and other human service agencies providing transportation is an eligible project through the Federal Transit Administration's (FTA) Section 5317 (New Freedom) and Section 5316 (Job Access and Reverse Commute – JARC) Programs. Mobility management is considered an eligible capital cost. Therefore, the federal share of eligible project costs is 80 percent (as opposed to 50 percent for operating projects).

The following excerpt on mobility management activities is included in the FTA guidance for the New Freedom and JARC Programs:

(1) Supporting new mobility management and coordination programs among public transportation providers and other human service agencies providing transportation. Mobility management is an eligible capital cost. Mobility management techniques may enhance transportation access for populations beyond those served by one agency or organization within a community. For example, a non-profit agency could receive New Freedom funding to support the administrative costs of sharing services it provides to its own clientele with other individuals with disabilities and coordinate usage of vehicles with other non-profits, but not the operating costs of the service. Mobility management is intended to build coordination among existing public transportation providers and other transportation service providers with the result of expanding the availability of service. Mobility management activities may include:

(a) The promotion, enhancement, and facilitation of access to transportation services, including the integration and coordination of services for individuals with disabilities, older adults, and low-income individuals;

(b) Support for short term management activities to plan and implement coordinated services;

(c) The support of State and local coordination policy bodies and councils;

(d) The operation of transportation brokerages to coordinate providers, funding agencies and customers;

(e) The provision of coordination services, including employer-oriented Transportation Management Organizations' and Human Service Organizations' customer-oriented travel navigator systems and neighborhood travel coordination activities such as coordinating individualized travel training and trip planning activities for customers;

(f) The development and operation of one-stop transportation traveler call centers to coordinate transportation information on all travel modes and to manage eligibility requirements and arrangements for customers among supporting programs; and

(g) Operational planning for the acquisition of intelligent transportation technologies to help plan and operate coordinated systems inclusive of Geographic Information Systems (GIS) mapping, Global Positioning System Technology, coordinated vehicle scheduling, dispatching and monitoring technologies as well as technologies to track costs and billing in a coordinated system and single smart customer payment systems (acquisition of technology is also eligible as a stand alone capital expense).

A Mobility Manager can be the centerpiece of an effort to coordinate existing services to maximize efficiency and effectiveness. This entity can be designed to:

- Plan and identify needs and solutions, with an emphasis on work, school and training trips.
- Continue to seek greater efficiencies and reduce duplication through coordination.
- Coordinate and seek public and private funding – including New Freedom, JARC, and sponsorships.
- Coordinate human service transportation with workforce boards, social service agencies, etc.
- Conduct marketing efforts, developing schedules and how to ride guides.
- Serve as One Stop Information Center.
- Function as a rideshare coordinator.
- Develop a mentoring function.

## Appendix D – Potential Non-DOT Federal Program Guide

Source – United We Ride Website
http://www.unitedweride.gov/1_691_ENG_HTML.htm

### U.S. Department of Agriculture

- Food and Nutrition Service

### U.S. Department of Education

- Office of Elementary and Secondary Education
- Office of Innovation and Improvement
- Office of Special Education and Rehabilitative Services

### U.S. Department of the Interior

- Bureau of Indian Affairs

### U.S. Department of Health and Human Services

- Health Resources and Services Administration
- Centers for Medicare and Medicaid Services
- Administration on Aging
- Substance Abuse and Mental Health Services
- Administration for Children and Families

### U.S. Department of Housing and Urban Development

### U.S. Department of Labor

- Employment Standards Administration
- Veterans' Employment and Training Service
- Employment and Training Administration

### U.S. Department of Veterans Affairs

- Veterans Benefits Administration
- Veterans Health Administration

Note: The individual links above may be accessed at the United We Ride Website:
http://www.unitedweride.gov/1_691_ENG_HTML.htm

# Appendix E – Workshop Attendees

## 1st Workshop – PDC 4, 5, 11 and 12

| Name | Organization | Type | County/PDC | Phone | E-mail |
|---|---|---|---|---|---|
| Kim Moore | Department of Rehab | CD | Franklin | 540-263-0785 | Kimberly.Moore@drs.virginia.gov |
| Gary Heinline | Pulaski Area Transit | PT | Pulaski | 540-980-7780 | gheinline@NRUSeniorServices.org |
| Curtis Andrews | RADAR | RPT | Roanoke | 540-343-1721 | Curtis@radartransit.org |
| Mary-Winston Deacon | Alliance For Families & Children | HS | PDC 11 | 434-645-2986 x231 | marywd@alliancecva.org |
| Kelly Hitchcock | Region 2000 Local Government Council | PDC | PDC 11 | 434-845-3491 | khitchcock@region2000.org |
| Clarence Dickerson | Piedmont Independent Living Center | HS | PDC 12 | 434-797-2530 | clarencerdickerson@yahoo.com |
| Lori Penn | Piedmont Independent Living Center | HS | PDC 12 | 434-797-2530 | missloripenn@hotmail.com |
| Jeanette King | Piedmont Independent Living Center | HS | PDC 12 | 434-797-2530 | jkpilc@yahoo.com |
| Joan Hullett | West Piedmont PDC | PDC | PDC 12 | 276-638-3987 | jhullett@wppdc.org |
| Leah Manning | West Piedmont PDC | PDC | PDC 12 | 276-638-3987 | lmanning@wppdc.org |
| Henry Ayers | PARC Workshop, Inc | HS/JT | Patrick | 276-694-4211 | parcworkshop@earthlink.net |
| Christine Visscher | Goodwill Industries and Valleys | HS/JT | Roanoke | 540-581-0620 | cvisscher@goodwillvalleys.com |
| Dan Brugh | Blacksburg,Christiansburg, Montgomery County MPO | MPO | Montgomery | 540-394-2145 | brughjd@montgomerycountyva.gov |
| Kevin Byrd | NRV PDC | PDC | PDC 4 | 540-639-9313 | kbyrd@nrvdc.org |
| Tammy Trimble | Transportation Policy group VTTI | R | Montgomery | 540-231-1545 | ttrimble@vtti.vt.edu |
| Teresa Carter | Southern AAA | AAA | Martinsville | 276-632-6442 | tcarter@southernaaa.org |
| Mark McCaskill | RVARC/RVAMPO | PDC | PDC 5 | 540-343-4417 | mmccaskill@rvarc.org |
| Ann Angert | New River Community Action | HS | PDC 4 | 540-633-5133 | angert@nrcaa.org |
| RB "Ben" Crawford | AARP VA | HS | Montgomery | 540-961-5733 | Ben.Crawford@vt.edu |
| Carl McDaniels | AARP VA | HS | Montgomery | 540-961-5733 | |
| Emily Simmons | Radford Univ. Training and Technical Assistance Center | HS | City of Radford | 540-831-7116 | esimmons@radford.edu |
| Alexandra Sommers | Virginia Tech Transportation Inst. (VTTI) | R | Blacksburg | 540-231-1006 | asommers@vtti.vt.edu |
| Gary Christez | Region 2000 | PDC | PDC 11 | 434-845-3491 | |
| Curtis Walker | Blue Ridge Independent Living Center (BRILC) | HS | PDC 5 | 540-342-1231 | CWalker@Brilc.org |

| Name | Organization | Type | County/PDC | Phone | E-mail |
|---|---|---|---|---|---|
| Keevie Hairston | Piedmont CSB | CSB | PDC 12 | 276-632-7128 | khairston@piedmontcsb.org |
| Todd Woodall | Piedmont CSB | CSB | Henry Co., Martinsville | 632-7128 | twoodall@piedmontcsb.org |
| Kenneth Young | Central Va AAA | AAA | PDC 11 | 434-386-9070 | KYoung@cvaaa.com |

**'Type' Key:**
AAA = Area Agency on Aging
CD = County Department
CSB = Community Service Board
HS = Human Services Organization
JT = Job Training Center
MPO = Metropolitan Planning Organization
MTP = Medicare Transportation Provider
PT = Public Transportation Provider (RPT = Rural)
R = Research Organization
SD = Statewide Department

## 2nd Workshop – PDC 4 and 5

| Name | Organization | County/PDC | Phone | E-mail |
|---|---|---|---|---|
| Leon Robertson | RADAR | Roanoke | 540-343-1721 | leon@radartransit.org |
| Dan Brugh | BCM – MPO | NRV | 540-394-2145 | brughjd@montgomerycountyva.com |
| Tina King | NRV Agency on Aging | PDC 4 | 540-980-7720 | tinaking@nrvaoa.org |
| Brett Lovell | NRV PDC | PDC 4 | 540-639-9313 | blovell@nrvdc.com |
| Josh Baker | NRV Community Services/ Community Transit | NRV | 540-831-4082 | jbaker@nrvcs.org |
| Gary Heinline | NRV Senior Service/Pulaski Area Transit | NRV | 540-980-5040 | gheinline@nrvseniorservices.org |
| Curtis Andrews | RADAR | PDC 5 | 540-343-1721 | curtis@radartransit.org |
| Debra Swetnam | BT | NRV | 540-961-1185 | dswetnam@blacksburg.gov |
| Mark McCaskill | RVARZ/ RVAMPO | PDC 5 | 540-343-4417 | mmccaskill@rvarz.org |
| Tammy Trimble | VTTI | 4/5 | 540-231-1545 | Ttrimble@vtti.vt.edu |
| Dave Morgan | Greater Roanoke Transit Co. | Roanoke | 540-982-305 | Dmorgan1@valleymetro.com |
| Ray Pethtel | TPG – VTTI | 4/5 | 540-231-1546 | rpethtel@vt.edu |
| Neil Sherman | DRPT | State | 804-786-1154 | Neil.sherman@drpt.virginia.gov |

## 3rd Workshop – PDC 4 and 5

| Name | Organization | Type | County/ PDC | Phone | E-mail |
|---|---|---|---|---|---|
| Christine Visscher | Goodwill Industries of Valleys | HS | PDC 5 | 540-581-0620 | cvisscher@goodwillvalleys.com |
| Stephanie Hoer | Goodwill Industries of Valleys | HS | PDC 5 | 540-581-0620 | shoer@goodwillvalleys.com |
| Glenn Orr | Transportation Policy Group VTTI | CV | PDC 4 | 540-231-1567 | Gorr05@vt.edu |

| Name | Organization | Type | County/ PDC | Phone | E-mail |
|---|---|---|---|---|---|
| Kevin Byrd | NRV PDC | PDC | PDC 4 | 540-639-9313 | kbyrd@montgomerycounty.va.gov |
| Ban Brugh | Blacksburg, Christiansburg, Montgomery Area MPO | MPO | PDC 4 | 540-394-2145 | brughjd@montgomerycountyva.gov |
| Curtis Walkam | Blue Ridge Independent Living Center | HS | PDC 5 | 540-342-1231 | cwalkman@brilc.org |
| Curtis Andrews | RADAR | PT | PDC 5 | 540-343-1721 | curtis@radartransit.org |
| Leon Robertson | RADAR | PT | PDC 5 | 540-343-1721 | leon@radartransit.org |
| Josh Baker | New River Valley CSB | CSB | PDC 4 | 540-831-5911 | Lbaker@nrvcs.org |
| Debbie Swetnam | Blacksburg Transit | PT | PDC 4 | 540-443-7100 ext 2052 | Dswetnam@blacksburg.gov |
| Mark McCaskill | RVARC/ RVAMPO | MPO | PDC 5 | 540-343-4417 | MmcCaskill@rvarc.org |
| Jeff Sizemore | DRPT | SD | | 804-382-3805 | Jeff.Sizemore@drpt.virginia.gov |
| Neil Sherman | DRPT | SD | | 804-786-1154 | Neil.Sherman@drpt.virginia.gov |

# Appendix F – Demographics of Potentially Transit Dependent Persons

## *New River Valley (PDC 4)*

### DEMOGRAPHICS OF POTENTIALLY TRANSIT DEPENDENT PERSONS

| Block Group Number | County | Land Area (Square Miles) | Households | Population | Population Density (Persons/ SqMi) | Elderly | Mobility Disabled | Below Poverty | Autoless Households |
|---|---|---|---|---|---|---|---|---|---|
| 510639901001 | Floyd | 31.6 | 491 | 1,014 | 32.1 | 174 | 85 | 61 | 14 |
| 510639901002 | Floyd | 39.0 | 649 | 1,487 | 38.1 | 247 | 147 | 209 | 31 |
| 510639901003 | Floyd | 28.2 | 709 | 1,412 | 50.1 | 283 | 141 | 186 | 15 |
| 510639901004 | Floyd | 31.9 | 400 | 805 | 25.3 | 180 | 57 | 107 | 23 |
| 510639901005 | Floyd | 21.8 | 845 | 1,750 | 80.2 | 482 | 148 | 277 | 79 |
| 510639901006 | Floyd | 29.4 | 584 | 1,321 | 45.0 | 210 | 101 | 42 | 9 |
| 510639901007 | Floyd | 15.8 | 507 | 979 | 61.9 | 263 | 69 | 111 | 55 |
| 510639902001 | Floyd | 24.1 | 319 | 649 | 26.9 | 130 | 8 | 56 | 11 |
| 510639902002 | Floyd | 28.9 | 398 | 878 | 30.4 | 177 | 59 | 94 | 16 |
| 510639902003 | Floyd | 33.0 | 540 | 1,210 | 36.7 | 202 | 157 | 112 | 34 |
| 510639902004 | Floyd | 48.6 | 605 | 933 | 19.2 | 252 | 137 | 153 | 32 |
| 510639902005 | Floyd | 19.8 | 367 | 725 | 36.5 | 167 | 34 | 66 | 18 |
| 510639902006 | Floyd | 29.1 | 349 | 711 | 24.5 | 185 | 81 | 142 | 43 |
| 510719901001 | Giles | 17.9 | 415 | 923 | 51.7 | 147 | 35 | 57 | 33 |
| 510719901002 | Giles | 45.4 | 538 | 1,138 | 25.1 | 217 | 87 | 125 | 34 |
| 510719902001 | Giles | 78.0 | 831 | 1,739 | 22.3 | 335 | 162 | 151 | 41 |
| 510719902002 | Giles | 5.5 | 463 | 901 | 163.0 | 173 | 120 | 93 | 41 |
| 510719902003 | Giles | 31.1 | 456 | 967 | 31.1 | 188 | 72 | 93 | 12 |
| 510719903001 | Giles | 7.4 | 276 | 617 | 83.2 | 197 | 66 | 23 | 16 |
| 510719903002 | Giles | 28.5 | 463 | 1,051 | 36.9 | 235 | 129 | 110 | 40 |
| 510719903003 | Giles | 4.6 | 514 | 1,130 | 244.9 | 267 | 84 | 190 | 58 |
| 510719903004 | Giles | 0.6 | 344 | 711 | 1,248.6 | 197 | 72 | 74 | 43 |
| 510719903005 | Giles | 14.3 | 453 | 930 | 64.9 | 196 | 92 | 119 | 35 |
| 510719903006 | Giles | 3.0 | 490 | 1,103 | 373.4 | 261 | 142 | 90 | 66 |
| 510719904001 | Giles | 9.7 | 631 | 1,417 | 145.9 | 316 | 133 | 121 | 32 |
| 510719904002 | Giles | 99.4 | 744 | 1,666 | 16.8 | 326 | 108 | 102 | 39 |
| 510719904003 | Giles | 0.3 | 329 | 689 | 2,444.6 | 159 | 55 | 54 | 45 |
| 510719904004 | Giles | 11.7 | 785 | 1,675 | 143.5 | 377 | 148 | 180 | 62 |
| 511210201001 | Montgomery | 1.3 | 11 | 8,248 | 6,502.0 | 2 | 96 | 0 | 0 |
| 511210202001 | Montgomery | 1.0 | 1,576 | 3,648 | 3,475.1 | 119 | 141 | 1,772 | 38 |
| 511210202002 | Montgomery | 0.1 | 469 | 978 | 8,563.4 | 37 | 0 | 280 | 43 |
| 511210202003 | Montgomery | 0.4 | 252 | 537 | 1,470.9 | 43 | 40 | 70 | 11 |
| 511210202004 | Montgomery | 2.8 | 991 | 1,817 | 644.0 | 606 | 254 | 296 | 158 |
| 511210203001 | Montgomery | 6.2 | 379 | 875 | 140.1 | 117 | 36 | 128 | 0 |
| 511210203002 | Montgomery | 4.5 | 445 | 1,073 | 237.6 | 201 | 28 | 67 | 22 |
| 511210203003 | Montgomery | 0.2 | 439 | 1,003 | 4,166.9 | 12 | 28 | 600 | 14 |
| 511210203004 | Montgomery | 0.1 | 457 | 809 | 11,428.9 | 20 | 17 | 370 | 54 |
| 511210203005 | Montgomery | 0.3 | 397 | 918 | 2,921.1 | 188 | 17 | 73 | 21 |
| 511210203006 | Montgomery | 0.1 | 505 | 1,034 | 7,450.2 | 11 | 31 | 662 | 81 |
| 511210204001 | Montgomery | 0.7 | 350 | 793 | 1,132.3 | 129 | 30 | 180 | 9 |

## *New River Valley (PDC 4)*

### DEMOGRAPHICS OF POTENTIALLY TRANSIT DEPENDENT PERSONS

| Block Group Number | County | Land Area (Square Miles) | Households | Population | Population Density (Persons/ SqMi) | Elderly | Mobility Disabled | Below Poverty | Autoless Households |
|---|---|---|---|---|---|---|---|---|---|
| 511210204002 | Montgomery | 0.5 | 1,793 | 5,309 | 9,917.9 | 78 | 135 | 3,957 | 63 |
| 511210204003 | Montgomery | 0.1 | 736 | 1,605 | 24,512.1 | 6 | 0 | 1,020 | 28 |
| 511210205001 | Montgomery | 0.2 | 395 | 782 | 4,659.1 | 61 | 23 | 307 | 45 |
| 511210205002 | Montgomery | 0.3 | 456 | 948 | 2,948.3 | 116 | 18 | 226 | 18 |
| 511210205003 | Montgomery | 1.6 | 474 | 1,197 | 763.3 | 181 | 11 | 397 | 0 |
| 511210205004 | Montgomery | 8.2 | 667 | 1,821 | 223.1 | 225 | 50 | 165 | 24 |
| 511210206001 | Montgomery | 3.9 | 933 | 1,922 | 490.2 | 330 | 78 | 268 | 26 |
| 511210206002 | Montgomery | 0.4 | 521 | 1,020 | 2,868.1 | 217 | 46 | 191 | 28 |
| 511210206003 | Montgomery | 0.3 | 824 | 1,757 | 5,142.8 | 142 | 69 | 766 | 73 |
| 511210207001 | Montgomery | 0.3 | 422 | 1,011 | 3,300.9 | 92 | 24 | 417 | 23 |
| 511210207002 | Montgomery | 0.2 | 279 | 512 | 3,091.9 | 44 | 0 | 272 | 17 |
| 511210207003 | Montgomery | 1.9 | 426 | 1,083 | 580.4 | 333 | 79 | 180 | 49 |
| 511210207004 | Montgomery | 0.1 | 480 | 999 | 7,983.9 | 49 | 50 | 332 | 24 |
| 511210207005 | Montgomery | 3.9 | 963 | 1,988 | 510.9 | 142 | 116 | 791 | 105 |
| 511210208001 | Montgomery | 0.4 | 420 | 872 | 2,257.0 | 145 | 64 | 115 | 20 |
| 511210208002 | Montgomery | 0.5 | 757 | 1,534 | 3,402.0 | 267 | 159 | 231 | 114 |
| 511210208003 | Montgomery | 1.3 | 785 | 1,814 | 1,361.1 | 263 | 98 | 168 | 52 |
| 511210208004 | Montgomery | 12.9 | 685 | 1,643 | 127.6 | 223 | 183 | 336 | 56 |
| 511210209001 | Montgomery | 0.5 | 542 | 1,263 | 2,587.2 | 302 | 91 | 29 | 47 |
| 511210209002 | Montgomery | 4.4 | 596 | 1,476 | 336.7 | 212 | 58 | 72 | 6 |
| 511210209003 | Montgomery | 5.4 | 741 | 1,710 | 314.8 | 248 | 142 | 244 | 32 |
| 511210210001 | Montgomery | 0.5 | 573 | 1,241 | 2,424.7 | 386 | 94 | 56 | 46 |
| 511210210002 | Montgomery | 4.5 | 461 | 1,296 | 287.7 | 196 | 38 | 27 | 15 |
| 511210210003 | Montgomery | 3.5 | 670 | 1,530 | 434.7 | 250 | 49 | 78 | 22 |
| 511210211001 | Montgomery | 2.3 | 560 | 1,224 | 532.7 | 186 | 77 | 109 | 62 |
| 511210211002 | Montgomery | 4.2 | 1,493 | 3,624 | 866.6 | 434 | 213 | 147 | 10 |
| 511210212001 | Montgomery | 3.6 | 462 | 1,035 | 289.8 | 157 | 159 | 163 | 14 |
| 511210212002 | Montgomery | 10.5 | 530 | 1,246 | 119.2 | 153 | 51 | 122 | 0 |
| 511210212003 | Montgomery | 11.9 | 654 | 1,537 | 128.9 | 203 | 139 | 217 | 31 |
| 511210212004 | Montgomery | 29.5 | 655 | 1,545 | 52.4 | 257 | 124 | 190 | 31 |
| 511210213001 | Montgomery | 69.9 | 843 | 2,037 | 29.2 | 316 | 128 | 182 | 28 |
| 511210213002 | Montgomery | 22.1 | 376 | 890 | 40.3 | 131 | 69 | 78 | 0 |
| 511210214001 | Montgomery | 5.3 | 371 | 846 | 159.5 | 139 | 90 | 134 | 16 |
| 511210214002 | Montgomery | 13.7 | 685 | 1,662 | 121.0 | 177 | 112 | 191 | 24 |
| 511210214003 | Montgomery | 12.0 | 626 | 1,482 | 123.1 | 251 | 81 | 85 | 28 |
| 511210214004 | Montgomery | 33.0 | 444 | 1,179 | 35.7 | 302 | 86 | 162 | 14 |
| 511210215001 | Montgomery | 28.3 | 638 | 1,523 | 53.7 | 219 | 44 | 44 | 18 |
| 511210215002 | Montgomery | 21.0 | 692 | 1,696 | 80.6 | 251 | 74 | 126 | 20 |
| 511210215003 | Montgomery | 34.5 | 685 | 1,724 | 49.9 | 261 | 84 | 59 | 12 |
| 511210215004 | Montgomery | 12.8 | 943 | 2,313 | 180.6 | 305 | 188 | 189 | 82 |
| 511552101001 | Pulaski | 22.3 | 524 | 1,167 | 52.3 | 227 | 71 | 148 | 44 |
| 511552101002 | Pulaski | 13.4 | 749 | 1,786 | 133.1 | 237 | 147 | 321 | 25 |
| 511552101003 | Pulaski | 10.7 | 542 | 1,161 | 108.1 | 193 | 53 | 71 | 49 |
| 511552101004 | Pulaski | 2.1 | 461 | 932 | 454.6 | 178 | 89 | 55 | 27 |

## *New River Valley (PDC 4)*

### DEMOGRAPHICS OF POTENTIALLY TRANSIT DEPENDENT PERSONS

| Block Group Number | County | Land Area (Square Miles) | Households | Population | Population Density (Persons/ SqMi) | Elderly | Mobility Disabled | Below Poverty | Autoless Households |
|---|---|---|---|---|---|---|---|---|---|
| 511552101005 | Pulaski | 0.2 | 274 | 598 | 3,291.7 | 132 | 14 | 59 | 7 |
| 511552101006 | Pulaski | 1.7 | 436 | 924 | 540.6 | 290 | 67 | 109 | 68 |
| 511552102001 | Pulaski | 0.7 | 659 | 1,323 | 1,774.8 | 416 | 144 | 144 | 89 |
| 511552102002 | Pulaski | 0.3 | 281 | 593 | 2,306.7 | 136 | 74 | 17 | 18 |
| 511552102003 | Pulaski | 0.5 | 385 | 718 | 1,365.8 | 171 | 152 | 276 | 109 |
| 511552102004 | Pulaski | 0.4 | 520 | 1,081 | 2,834.6 | 221 | 169 | 470 | 199 |
| 511552102005 | Pulaski | 5.5 | 574 | 1,430 | 260.0 | 368 | 79 | 45 | 37 |
| 511552102006 | Pulaski | 7.8 | 585 | 1,384 | 177.1 | 345 | 115 | 177 | 28 |
| 511552102007 | Pulaski | 42.5 | 547 | 1,341 | 31.6 | 272 | 74 | 93 | 18 |
| 511552103001 | Pulaski | 0.4 | 645 | 1,205 | 2,879.9 | 282 | 110 | 139 | 80 |
| 511552103002 | Pulaski | 1.1 | 345 | 697 | 642.8 | 172 | 115 | 182 | 29 |
| 511552103003 | Pulaski | 2.2 | 592 | 1,329 | 600.2 | 265 | 146 | 176 | 35 |
| 511552103004 | Pulaski | 22.4 | 394 | 840 | 37.5 | 180 | 67 | 187 | 48 |
| 511552103005 | Pulaski | 23.9 | 308 | 734 | 30.7 | 141 | 63 | 39 | 0 |
| 511552104001 | Pulaski | 8.6 | 515 | 1,099 | 128.4 | 234 | 144 | 282 | 60 |
| 511552104002 | Pulaski | 0.3 | 479 | 1,006 | 2,945.1 | 198 | 145 | 159 | 71 |
| 511552104003 | Pulaski | 10.1 | 573 | 1,304 | 128.9 | 245 | 104 | 232 | 67 |
| 511552104004 | Pulaski | 18.5 | 511 | 1,105 | 59.7 | 221 | 142 | 162 | 32 |
| 511552104005 | Pulaski | 11.2 | 449 | 938 | 83.9 | 140 | 38 | 30 | 0 |
| 511552105001 | Pulaski | 14.1 | 604 | 914 | 64.8 | 217 | 76 | 36 | 0 |
| 511552105002 | Pulaski | 35.1 | 388 | 880 | 25.1 | 157 | 82 | 76 | 19 |
| 511552105003 | Pulaski | 35.4 | 409 | 772 | 21.8 | 167 | 134 | 84 | 24 |
| 511552106001 | Pulaski | 14.5 | 628 | 2,094 | 144.4 | 243 | 88 | 119 | 7 |
| 511552106002 | Pulaski | 5.9 | 729 | 1,093 | 185.2 | 219 | 74 | 56 | 16 |
| 511552106003 | Pulaski | 6.7 | 605 | 1,173 | 175.8 | 230 | 118 | 126 | 23 |
| 511552107001 | Pulaski | 1.2 | 831 | 1,772 | 1,515.0 | 410 | 107 | 146 | 54 |
| 511552107002 | Pulaski | 0.6 | 423 | 984 | 1,545.2 | 156 | 81 | 92 | 25 |
| 511552107003 | Pulaski | 0.2 | 360 | 750 | 3,173.7 | 134 | 67 | 136 | 25 |
| 517500101001 | Radford city | 0.9 | 1,004 | 5,052 | 5,745.3 | 86 | 183 | 1,741 | 93 |
| 517500101002 | Radford city | 0.4 | 327 | 759 | 2,122.4 | 103 | 9 | 201 | 24 |
| 517500101003 | Radford city | 0.1 | 625 | 1,315 | 9,955.4 | 34 | 66 | 1,076 | 30 |
| 517500101004 | Radford city | 2.0 | 794 | 1,561 | 777.0 | 175 | 45 | 519 | 60 |
| 517500101005 | Radford city | 1.1 | 456 | 832 | 768.6 | 154 | 90 | 0 | 20 |
| 517500102001 | Radford city | 1.2 | 485 | 976 | 785.9 | 203 | 70 | 27 | 72 |
| 517500102002 | Radford city | 0.4 | 314 | 704 | 1,712.6 | 208 | 69 | 13 | 0 |
| 517500102003 | Radford city | 0.4 | 470 | 1,028 | 2,761.6 | 240 | 116 | 100 | 47 |
| 517500102004 | Radford city | 1.0 | 952 | 2,171 | 2,107.0 | 404 | 150 | 236 | 106 |
| 517500102005 | Radford city | 2.3 | 710 | 1,461 | 634.5 | 291 | 135 | 187 | 60 |
| | | 1,457.1 | 69,484 | 165,146 | 192,213.9 | 25,373 | 10,923 | 29,083 | 4,596 |

## Appendix G – Statement of Participation

***Requested Action***

In order to meet the spirit and intent of the SAFETEA-LU legislation and the *Final FTA Guidance on Coordinated Planning Requirements,* workshop participants representing the 21 PDCs are requested to affirm that they have been involved in the coordinated planning process for their region and endorse the output of that involvement, as captured by their local CHSM Plan.

***Statement of Participation***

***As a participant and/or stakeholder in the coordinated planning process in the Commonwealth of Virginia for human service and public transportation, I have been invited to participate and provide input into the CHSM Plan for my region. I acknowledge that this CHSM Plan is a legitimate representation of my region's needs, gaps, strategies, and potential projects that will support future funding applications under the Section 5310, S. 5316, and S. 5317 Programs.***

***Participating Agency (Please sign your Agency Name <u>only</u>)***

- Roanoke Valley-Alleghany Regional Commission
- Roanoke Valley Area Metropolitan Planning Organization
- Transportation Policy Group- Virginia Tech Transportation Institute
- Blacksburg, Christiansburg, Montgomery Area MPO
- New River Valley PDC
- New River Valley Senior Services Inc./ Pulaski Area Transit
- Unified Human Services Transportation Systems, Inc. T/A RADAR
- New River Valley Community Services
- Goodwill Industries of the Valleys, Inc.
- Blacksburg Transit

(Note: The group intends to more formally "endorse" the Plan through the existing MPO process.)

DRPT
Virginia Department of Rail and Public Transportation
The Smartest Distance Between Two Points